Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 1 of 57

Fill in this information to identify your case	
United States Bankruptcy Court for the:	
Northern District of Illinois	
Case number (If known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13



Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

About Debtor 1:	
About Debtor 1.	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name	
Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. Pamela First name L. Middle name King-Fisher Last name Suffix (Sr., Jr., II, III)	First name Middle name Last name Suffix (Sr., Jr., II, III)
2. All other names you have used in the last 8 years	First name Middle name
Include your married or Middle name maiden names. Last name	Last name
First name	First name
Middle name	Middle name
Last name	Last name
3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number of the security or security	OR .

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 2 of 57

Debtor 1 Pamela L.	King-Fisher Name Last Name	Case number (if known)
FILST IVAITIE MEGGR	Name Last Name	
THE STATE OF THE PROPERTY OF THE STATE OF TH	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer Identification Numbers (EIN) you have used in	☑ I have not used any business names	or EINs.
the last 8 years	Business name	Business name
include trade names and doing business as names	Business name	Business name
	Dualifeas Harite	Dusiness name
	EIN	EIN
	EIN	EIN
6. Where you live	an Tanan Mala di Kaban Mala Mala Mala Mala Mala Mala Mala Ma	If Debtor 2 lives at a different address:
	1362 Hirsch Ave	
	Number Street	Number Street
	Calumet City IL	60409
	City State	ZIP Code City State ZIP Code
•	Cook County	County
	If your mailing address is different fro above, fill it in here. Note that the court any notices to you at this mailing address	the one If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send
	Number Street	Number Street
	P.O. Box	P.O. Box
	City State	ZIP Code City State ZIP Code
6. Why you are choosing	шения выполняем и домення выполняем на	Сheck one:
this district to file for bankruptcy	Over the last 180 days before filing th I have lived in this district longer than other district.	on any Over the last 180 days before filing this petition. I have lived in this district longer than in any other district.
	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 3 of 57

Deb	otor 1 Pamela L. First Name Middle Na	<u>King-Fis</u>	sher Last Name			Case number (# k	(nown)		
Quality (March									
Pa	Tell the Court Abo	ut Your B	ankrup	tcy Case					
	The chapter of the Bankruptcy Code you	Check o for Bank	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	are choosing to file under	☑ Cha	Chapter 7 Chapter 11						
		☐ Cha							
		☐ Cha	Chapter 12						
		☐ Cha	pter 13						
8.	How you will pay the fee	local your subrest with I need Apple Solution By lates pay to the subrest subr	court for self, you nitting you a pre-pred to particular that we a just that aw, a just than 150 the fee i	or more details about may pay with case our payment on your inted address. The fee in instal for Individuals to Pattern at my fee be waited and the official payment.	but how you ments, cashier's cooper behalf, you liments. If you liments are the filling tred (You may trequired to, who werty line the you choose the	nay pay. Typicalisheck, or money ur attorney may use this operation of the control of the contro	eck with the clerk's office in your ly, if you are paying the fee order. If your attorney is pay with a credit card or check ents (Official Form 103A). Icion only if you are filing for Chapter 7. and may do so only if your income is ir family size and you are unable to not the state of the		
9. Have you filed for bankruptcy within the last 8 years?	☑ No	1221 1131 2131 1132 1134 1134 1134 1134		When	MM / DD / YYYY	Case number			
			District .		When	MM / DD / YYYY	Case number		
			District _	\$1,70,70 \$10,70	When	MM / DD / YYYY	Case number		
0.	Are any bankruptcy	☑ No	0000 (LANGE), A (LANGE PE) (1975), 1877	ngangga panggapa kagapapan mendupakan dalah d					
	cases pending or being filed by a spouse who is	Yes.	Debtor .				Relationship to you		
not filing this case with you, or by a business partner, or by an				When	MM / DD / YYYY	Case number, if known			
	affiliate?		Debtor .				Relationship to you		
		District		When	MM / DD / YYYY	Case number, if known			
	Do you rent your residence?	☐ No. ☑ Yes.	Go to lir Has you residence	ır landlord obtained a	an eviction judg	ment against you	and do you want to stay in your		
			☐ Yes	Go to line 12. . Fill out <i>Initial Stater</i> bankruptcy petition.	nent About an i	Eviction Judgment	t Against You (Form 101A) and file it with		

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 4 of 57

Pamela L. First Name Middle Na	ing-Fisher Case number (if known)	
art&: Report About Any	usinesses You Own as a Sole Proprietor	
Are you a sole proprietor	☑ No. Go to Part 4.	
of any full- or part-time business?	☐ Yes. Name and location of business	
A sole proprietorship is a	The state of the s	
business you operate as an individual, and is not a	Name of business, if any	
separate legal entity such as a corporation, partnership, or		
LLC.	Number Street	
If you have more than one sole proprietorship, use a		
separate sheet and attach it to this petition.		
F 2 3 1 2 3 1 3 1 3 1 3 1 3 1 3 1 3 1 3 1	City State ZIP Coc	le
	Check the appropriate box to describe your business:	
	☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))	
	☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))	
	Stockbroker (as defined in 11 U.S.C. § 101(53A))	
	Commodity Broker (as defined in 11 U.S.C. § 101(6))	
	☐ None of the above	
Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see	most recent balance sheet, statement of operations, cash-flow statement, and feder any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B) No. I am not filing under Chapter 11. No. I am filing under Chapter 11, but I am NOT a small business debtor accordi).
11 U.S.C. § 101(51D).	the Bankruptcy Code.	
	Yes. I am filing under Chapter 11 and I am a small business debtor according to Bankruptcy Code.	the definition in the
rt 4: Report if You Own o	Have Any Hazardous Property or Any Property That Needs Immedia	ite Attention
Do you own or have any property that poses or is	Z N ₀	
alleged to pose a threat	Yes. What is the hazard?	**
of imminent and identifiable hazard to		
public health or safety?		
Or do you own any property that needs	If immediate attention is pooded, why is it pooded?	
immediate attention?	If immediate attention is needed, why is it needed?	
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		
	Where is the property?	
	Nullibel Sueet	
	City Stat	e ZIP Code
	City	J 21, 0000

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Page 5 of 57 Document

Debtor	1
--------	---

<u>Pamela</u>	L. Kind	g-Fisher	
First Name	Middle Name	Last Mama	

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

You must check one:

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:	

✓ I received a briefing from an approved credit

counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition. you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not	required	to recei	ve a	briefing	about
	ounseling				

☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

☐ Active duty. I am currently on active military duty in a military combat zone.

reasonably tried to do so.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about
credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

My physical disability causes me Disability. to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so. ☐ Active duty. I am currently on active military

duty in a military combat zone. If you believe you are not required to receive a

briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 6 of 57

D	ebtor 1 Pamela L. First Name Middle Nam	King-Fisher Last Name	Case number (if son	iown)		
	art 6: Answer These Que	stions for Reporting Purpos	ses			
16	s. What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. ☐ Yes. Go to line 17				
		16b. Are your debts primar money for a business or in No. Go to line 16c. Yes. Go to line 17.	rily business debts? Business debts ovestment or through the operation of the	are debts that you incurred to obtain business or investment.		
		16c. State the type of debts you	u owe that are not consumer debts or bus	siness debts.		
17	. Are you filing under Chapter 7?	☐ No. I am not filing under Ch		TO COMMITTEE AND THE PROPERTY OF THE PROPERTY	Securi	
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	Yes. I am filing under Chapt administrative expense No Yes	ter 7. Do you estimate that after any exer es are paid that funds will be available to	npt property is excluded and distribute to unsecured creditors?		
18.	How many creditors do you estimate that you owe?	№ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000	1724	
19.	How much do you estimate your assets to be worth?	✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
20.	How much do you estimate your liabilities to be?	☑ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
7	пГА Sign Below					
Fc	or you	correct. If I have chosen to file under Cha	apter 7, I am aware that I may proceed, i understand the relief available under each	f eligible, under Chapter 7, 11,12, or 13		
		If no attorney represents me and	d I did not pay or agree to pay someone vand read the notice required by 11 U.S.C			
		I understand making a false state	ılt in fines up to \$250,000, or imprisonme	money or property by fraud in connection		
		Signature of Debtor 1	7214	e of Debtor 2		
		Executed on	Executed	on		

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main

Debtor 1 Pamela L. K First Name Middle Name	ing-Fisher Case number (ul known)		
For you if you are filing this bankruptcy without an attorney	The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.		
If you are represented by an attorney, you do not need to file this page.	To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.		
	You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.		
	If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.		
	Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences? \[\sum \text{No} \] Yes		
	Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned? No Yes		
	Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms? ✓ No ✓ Yes. Name of Person		
	By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case. Signature of Debtor 1 Date MM / DD / YYYY Date		

Contact phone

Email address

Cell phone

(708) 268-5351

Email address brownsugar 49@yahoo.com

Contact phone _

Cell phone

Entered 09/28/17 11:14:49 Desc Main Case 17-29025 Doc 1 Filed 09/28/17 Page 8 of 57 Document

Debtor 1	Pamela L	. King-Fisher	
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
Inited States	Bankruptcy Cou	rt for the: Northern District of II	linois
ase number			

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$ 4,580.00
1c. Copy line 63, Total of all property on Schedule A/B	\$4,580.00
Summarize Your Liabilities	
	Your liabilities Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	·· + \$ 46,182.00
Your total liabilities	\$ 46,182.00
Tes: Summarize Your Income and Expenses	······································
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	. \$1,947.00
Schedule J: Your Expenses (Official Form 106J)	

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 9 of 57

Pamela L. King-Fisher

Debtor 1

De	blor 1 First Name Middle Name Last Name C	Case number (if known)
	First Name Middle Name Last Name Last Name Answer These Questions for Administrative and Statistical Record	•
	Are you filing for bankruptcy under Chapters 7, 11, or 13?	3
	 No. You have nothing to report on this part of the form. Check this box and submit this ✓ Yes 	form to the court with your other schedules.
7.	What kind of debt do you have?	ભાગમાં ભાગમા
	Your debts are primarily consumer debts. Consumer debts are those "incurred by as family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpose.	n individual primarily for a personal, oses. 28 U.S.C. § 159.
	Your debts are not primarily consumer debts. You have nothing to report on this pathis form to the court with your other schedules.	rt of the form. Check this box and submit
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly in Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	ncome from Official \$1,492.00
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:	
	From Part 4 on Schedule E/F, copy the following:	Total claim
	9a. Domestic support obligations (Copy line 6a.)	\$0.00
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$
	9d. Student loans. (Copy line 6f.)	\$
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ s <u>0.00</u>
	9g. Total. Add lines 9a through 9f.	\$0.00

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 10 of 57

Fill in t	his information to identify your case and th	is filing:		
Debtor 1	Pamela L. King-Fisher			
	First Name Middle Name	Last Name		
Debtor 2 (Spouse, i	if filing) First Name Middle Name	Last Name		
United S	tates Bankruptcy Court for the: Northern District o	1		
Case nu		i marioro		
Odde Ha			[Check if this is an
			·	amended filing
Offic	cial Form 106A/B			
Scl	nedule A/B: Propert	·V		40/45
	_	s. List an asset only once. If an asset fits in more		12/15
respon	ry where you think it his best. Be as complisible for supplying correct information. If mour name and case number (if known). Answ	ete and accurate as possible. If two married peop lore space is needed, attach a separate sheet to th	le are filing together, bo nis form. On the top of a	oth are equally
1. Do yo	ou own or have any legal or equitable intere	st in any residence, building, land, or similar prop	erty?	
ZI N	io. Go to Part 2.		•	
☐ Y	es. Where is the property?	N		
		What is the property? Check all that apply. Single-family home	Do not deduct secured cla	
1.1.	Street address, if available, or other description	Duplex or multi-unit building	the amount of any secure Creditors Who Have Clair	
	Sueet address, if available, or other description	☐ Condominium or cooperative	Current value of the	Current value of the
		Manufactured or mobile home	entire property?	portion you own?
		☐ Land ☐ Investment property	\$	\$
		Timeshare	Describe the nature of	of your ownership
	City State ZIP Code	Other	interest (such as fee the entireties, or a life	simple, tenancy by
		Who has an interest in the property? Check one.	the entireties, or a mi	e estate), ii kiiowii.
		Debtor 1 only		
	County	Debtor 2 only		
		Debtor 1 and Debtor 2 only	Check if this is co (see instructions)	mmunity property
		At least one of the debtors and another Other information you wish to add about this it		
		property identification number:		
If you	own or have more than one, list here:			
		What is the property? Check all that apply.	Do not deduct secured cla	
1.2.		Single-family home Duplex or multi-unit building	the amount of any secured Creditors Who Have Clain	
	Street address, if available, or other description	Condominium or cooperative	Current value of the	
		☐ Manufactured or mobile home	entire property?	portion you own?
		Land	\$	\$
		☐ Investment property ☐ Timeshare	Describe the nature o	f your ownership
	City State ZIP Code	Other	interest (such as fee s	simple, tenancy by
		Who has an interest in the property? Check one.	the entireties, or a life	estate), if known.
		Debtor 1 only		
	County	Debtor 2 only		
	- County	Debtor 1 and Debtor 2 only	Check if this is con	mmunity property
		At least one of the debtors and another	(see instructions)	
		Other information you wish to add about this iter		
		property identification number:		

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 11 of 57

ebtor 1		ing-Fisher	Case number (#	konum	
	First Name Midd	le Name Last Name	- Case Harriset (/	MIOWI)	
			e e e e e e e e e e e e e e e e e e e		
			What is the property? Check all that apply.	Do not deduct secured cl	
1.3.	Street address, if available		Single-family home	the amount of any secure Creditors Who Have Clai	
	Steet address, if available	e, or other description	Duplex or multi-unit building Condominium or cooperative	Current value of the	naturnos de la como formación de la Fi
			Manufactured or mobile home	entire property?	portion you own?
		5 - C - C - C - C - C - C - C - C - C -	☐ Land	\$	\$
			☐ Investment property	_	
	City	State ZIP Code	Timeshare	Describe the nature of interest (such as fee	of your ownership simple, tenancy by
			Other	the entireties, or a lif	e estate), if known.
			Who has an interest in the property? Check one.	***************************************	
	County		Debtor 1 only		
	County		Debtor 2 only	□ a	
			Debtor 1 and Debtor 2 only	(see instructions)	mmunity property
			At least one of the debtors and another	,	
			Other information you wish to add about this ite property identification number:	em, such as local	
			property identification framework	***************************************	
144 t	he dellar value of the i	nortion you own for al	l of your entries from Part 1, including any entries	, for name	0.4
	-	=	nere		\$0.0
		the state of the s	the first of the control of the cont		
you c	own, lease, or have leg	al or equitable interes	it in any vehicles, whether they are registered or r	not? Include any vehicles	
own	that someone else drive	s. If you lease a vehicle	e, also report it on Schedule G: Executory Contracts a	and Unexpired Leases.	
	vans, trucks, tractors,	sport utility vehicles	motorcycles		
⊒ No					
2 Ye	es				
3.1.	Make:	Chevy	Who has an interest in the property? Check one.	Do not deduct secured cla	ims or exemptions. Put
, i.	Model:	Trail Blazer	Debtor 1 only	the amount of any secured Creditors Who Have Clain	
	Year:	2006	Debtor 2 only	samuel de sandre de la levi de crossor	and the second second second second
			Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of th
	Approximate mileage:		At least one of the debtors and another	*******************	portion you own?
	Other information:				portion you own?
			Check if this is community property (cos	\$ 2,000.00	•
			Check if this is community property (see instructions)	\$	•
				\$ 2,000.00	•
				\$ 2,000.00	•
you	own or have more than	one, describe here:		\$ 2,000.00	•
•	own or have more than	one, describe here:		Do not deduct secured cla	\$ 2,000.00
•		one, describe here:	instructions) Who has an interest in the property? Check one. Debtor 1 only		\$ 2,000.00 ims or exemptions. Put I claims on <i>Schedule D</i> :
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Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 12 of 57

or 1	Pamela L. King-Fisher First Name Middle Name	Last Name Case number (#	Kilowiij	****
		and the second of the second o		
3.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	
	Model:	Debtor 1 only	the amount of any secure Creditors Who Have Clair	
	Year:	Debtor 2 only	a secondario de la companio de la c	
	Approximate mileage:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of t portion you own?
	Other information:	 At least one of the debtors and another 	• • • • •	parametry you out the
	Otter intermation.	Check if this is community property (see	\$	\$
		instructions)		*
4.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	ims or exemptions. Put
	Model:	Debtor 1 only	the amount of any secure	d claims on <i>Śchedule D</i>
		Debtor 2 only	Creditors Who Have Clair	ns Secured by Property.
	Year:	Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	 At least one of the debtors and another 	entire property?	portion you own?
	Other information:		_	
		Check if this is community property (see instructions)	\$	\$
		entre.		
amp No	oles: Boats, trailers, motors, persona	and other recreational vehicles, other vehicles, and access watercraft, fishing vessels, snowmobiles, motorcycle accessor		
amµ No	oles: Boats, trailers, motors, persona			
amµ No Ye	oles: Boats, trailers, motors, persona			ims or exemptions. Put
amµ No Ye	oles: Boats, trailers, motors, persona s Make:	I watercraft, fishing vessels, snowmobiles, motorcycle accesso	Do not deduct secured cla the amount of any secured	d claims on <i>Schedule D:</i>
amp No Ye	oles: Boats, trailers, motors, persona s Make:	I watercraft, fishing vessels, snowmobiles, motorcycle accesso Who has an interest in the property? Check one.	ories Do not deduct secured cla	d claims on <i>Schedule D:</i>
a <i>mµ</i> No Ye	oles: Boats, trailers, motors, persona s Make: Model:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured cla the amount of any secured	l claims on <i>Schedule D:</i>
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Case 17-29025

Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 13 of 57

Debtor 1

Pamela	L.	King-Fisher

First Name Middle Name Last Name Case number (if known)_

Part 3) Describe Your Personal and Household Items	
Do you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6. Household goods and furnishings	er examplions.
Examples: Major appliances, furniture, linens, china, kitchenware	
□ No	
Yes. Describe Furniture	\$1,500.00
7. Electronics	
Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
No speciments and the second of the second o	······································
☐ Yes. Describe	\$
8. Collectibles of value	omegan i ^c
Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No	
☐ Yes. Describe	\$
9. Equipment for sports and hobbies	naturaj suk
Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
Yes. Describe	\$
10. Firearms	MMAn on's
Examples: Pistols, rifles, shotguns, ammunition, and related equipment No	andrese
Yes. Describe	\$
11. Clothes	
Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No	
☑ Yes. Describe Clothes	\$500.00
12. Jewelry	
Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
☐ No ☑ Yes. Describe Jewelry	\$
A A Law Source and the law section of the law secti	ne d
13. Non-farm animals Examples: Dogs, cats, birds, horses	
2 No	ANTEPS
Yes. Describe	\$
14. Any other personal and household items you did not already list, including any health aids you did not list	
2 No	weng
☐ Yes. Give specific information	\$
15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached	\$ 2,300.00
for Part 3. Write that number here	

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 14 of 57

Debtor 1

Pamela	L.	King-Fisher

First Name

Last Name

Case number (if known)

Do you own or have any	/ legal or equitable interest in	any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions,
16. Cash <i>Examples:</i> Money you	ı have in your wallet, in your hor	ne, in a safe deposit box, and on hand when you file your petition	
☑ No			
☐ Yes		Cash:	\$
17. Deposits of money Examples: Checking, s and other s	savings, or other financial accor similar institutions. If you have n	unts; certificates of deposit; shares in credit unions, brokerage house nultiple accounts with the same institution, list each.	S,
☑ No			
☐ Yes		Institution name:	
	17.1. Checking account:	Bank of America	
	17.2. Checking account:		_ \$
	17.3. Savings account:	Bank of America	\$80.00
	17.4. Savings account:		- \$
	17.5. Certificates of deposit:		~ \$
	17.6. Other financial account:		- \$
	17.7. Other financial account:		- \$
	17.8. Other financial account:		- \$
	17.9. Other financial account:		- \$
Examples: Bond funds,	or publicly traded stocks investment accounts with broke	erage firms, money market accounts	
☑ No ☐ Yes	Institution or issuer name:		
			_ \$
			_ \$
			- \$
9. Non-publicly traded s an LLC, partnership, a		rated and unincorporated businesses, including an interest in	
☑ No	Name of entity:	% of ownership:	
Yes. Give specific information about			\$
them		00/	\$
	***************************************	<u>U70</u> %	\$

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 15 of 57

Pamela L. King-Fisher Debtor 1 Case number (if known)_ First Name Last Name 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. **Z** No ☐ Yes. Give specific Issuer name: information about them..... 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans Z No Yes. List each account separately. Type of account: Institution name: 401(k) or similar plan: Pension plan; IRA: Retirement account: Keogh: Additional account: Additional account: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No ☐ Yes..... Institution name or individual Electric: Gas: Heating oil: Security deposit on rental unit: ___ Prepaid rent: Telephone: Water Rented furniture: Other: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) V No Issuer name and description:

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Mair Document Page 16 of 57

Pamela L. King-Fisher Debtor 1 First Name 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). Z No ☐ Yes Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ZI No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements **Ø** No Yes. Give specific information about them... \$ 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☑ No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you Z No Yes. Give specific information Federal: about them, including whether you already filed the returns State: and the tax years..... Local 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement Yes. Give specific information..... Alimony: Maintenance: Support: Divorce settlement: Property settlement: 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else **☑** No Yes. Give specific information......

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 17 of 57

Deb	otor 1		King-Fisher	Case no	iumber (if known)	
		First Name	Middle Name	Lasi Name	The second secon	
as I	ntaranta	in incomman	nellalaa			
		in insurance : Health disa		ce; health savings account (HSA); credit, homeowner's	e or renter's insurance	
	Z) No	, , , , , , , , , , , , , , , , , , , ,	omy, or mo modium	so, reduct burnings decoding (Hory, Great, Horneswile) s	s, or reiner s mourance	
		lama tha incu	rance company			
•			and list its value	Company name: Bene	eficiary:	Surrender or refund value:
						\$
				M. M		•
						\$
					Waterlands de contra de co	\$
ll q	f you are roperty b	the beneficiar		rom someone who has died pect proceeds from a life insurance policy, or are curre	ently entitled to receive	
	2 No		8	1987 i 1982 i 19	enthem the section of the state of the section of t	5/July
	Tyes. G	Sive specific in	formation			-
			ANDAYI		**************************************	\$
E	xamples 2 No	: Accidents, e	mployment disputes	not you have filed a lawsuit or made a demand for a, insurance claims, or rights to sue		one.
Ĺ.	⊶al Yes.L	escribe each	claim			\$
ŧ	ther con o set off No		unliquidated claim	s of every nature, including counterclaims of the de		
	🕽 Yes. D	escribe each	claim		Need in A reflect both and authorized in the management of a transport over a common became a service -	
					trades and consistent accessors a believe to the Control of the Milester, A.V. a Architect (Albert M. P. Variants) of man	\$
ū	1 No		ou did not already			\$
				from Part 4, including any entries for pages you h		\$ 280.00
Т	or Part 4.	write that n	umber nere			•
				and the second s		
mismbalaige						
D.	15) E	escribe A	ny Business-R	elated Property You Own or Have an In	iterest In. List any re	eal estate in Part 1.
						·····
			iy legal or equitab	e interest in any business-related property?		
		to Part 6.				
L	J Yes. G	io to line 38.				
						Current value of the portion you own?
						Do not deduct secured claims
						or exemptions.
		vonationhla -	r commissions yo	ı already earned		
		receivable o	COMMISSIONS YO	alleady earned		
	ZINo		engamagning a seminara sole area (d) vi let tipe e (a forego algebra minor cortaca da la el ar	- pulpaging right plants and many control and the self-state and the self-state and the self-state areas, and price plant and many common prices with a price plant and the self-state areas and the self-state areas are self-state areas areas are self-state areas are self-state areas areas are self-state ar	· reasonable at a filterina of the first of the following common as when more of the filter flows, and when the first of the entering of the filterina of the f	
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39. C	office equ	uipment, furn	ishings, and supp	lies modems, printers, copiers, fax machines, rugs, telephones, do	lesks, chairs, electronic devices	
		ousiness-related	a computers, sortware,	modernial brimerial ashares and masumest radal combination as		
	ANO ANO	Į ras	dand to a second significant of the second second second second second of the second s	epolytement in mental of the clinical polytem in Medical color and	, established purity group an more conserved a Life (1975) of presenting the country of the State (1976, pringer a condension a classical St	•
Ļ	→ Yes. D	escribe			ka pilitekkan angara kanishi (A. Saki) kalishi kananan anakashi Milika pana bilanca Vena ah kalishilika 2000ka	Φ
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Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 18 of 57

Debtor 1	Pamela L	King-Fisher Middle Name Last Nam	Case number (# k	пошп)	
	ery, fixtures, e	quipment, supplies you us	se in business, and tools of your trade		
☑ No				tinate de desarrol trada de como como estra altra altra de constituir de constituir en constituir en constitui	watering .
☐ Yes	s. Describe	att dilligeratili lakannya garang kapataj shiya jihay jihayo wandhan karang ayayaya ya sa			\$
41. Invento	orv				
☑ No		enterior promitioner reconsideration fractional first fraction for the 2 months for 2 months for the 2 month		······································	
☐ Yes	s. Describe				\$
42 Intoroe	te in nartnerehi	ps or joint ventures		and the second	ene evo.
42. Interes ✓ No	is in partifetsiii	ha or four seurnea			
	s. Describe	Name of online		% of ownership:	
				,	œ.
				% %	\$ \$
				%	\$
					·
43. Custon M No	ner lists, mailin	g lists, or other compilation	ons		
•	. Do vour lists	include personally identifi	iable information (as defined in 11 U.S.C. § 101(41A))	17	
	□ No	•	,	, -	
	Yes. Descr	ribe			
		Comments			\$
aa Amu hu	ninana valatad :	property you did not alrea		risigandi plantisi sirin e e etisianinanda yang sinastanin danapasinda yan sirin peruntu antisen etisen etisen	worm. X
₩. Ally bu	Siliess-Felateu	property you did not alrea	uy nat		
	. Give specific				\$
info	rmation			***************************************	
		***************************************		***************************************	\$
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		***************************************			\$
s Addth	o dollar value o	f all of your entries from P	Part 5, including any entries for pages you have atta	iched	e 0.00
			art o, including any entities for pages you have acce		\$ 0.00
Part 6:			ial Fishing-Related Property You Own or Hav	e an Interest l	n.
	If you own or	have an interest in farmla	nd, list it in Part 1.		
		ttit-ble intore	and in any form or commercial fiching related prope	artu?	
	Go to Part 7.	ny legal or equitable intere	est in any farm- or commercial fishing-related prope	,, ty :	
	. Go to line 47.				
					Current value of the
					portion you own?
					Do not deduct secured claims or exemptions.
47. Farm a	nimals				
Exampl	les: Livestock, po	oultry, farm-raised fish			
■ No				ander han de stillere i had i ingening observations and the contract of the stillere is the co	······································
☐ Yes	·	(у сторы в середня в ведения) в да поситовниковання выполня об в СС подраднення равотня постига на 1 и 1 годи			
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Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 19 of 57

Pamela L. King-Fisher Debtor 1 Middle Name Last Name 48. Crops-either growing or harvested Z No Yes. Give specific information..... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade ZI No ☐ Yes..... 50. Farm and fishing supplies, chemicals, and feed No ☐ Yes..... 51. Any farm- and commercial fishing-related property you did not already list Z No Yes. Give specific information..... 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached 0.00 for Part 6. Write that number here Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership Z No Yes. Give specific information..... 0.00 54. Add the dollar value of all of your entries from Part 7. Write that number here List the Totals of Each Part of this Form Part B 0.00 55. Part 1: Total real estate, line 2 2,000.00 56. Part 2: Total vehicles, line 5 2,300.00 57. Part 3: Total personal and household items, line 15 280.00 58. Part 4: Total financial assets, line 36 0.00 59. Part 5: Total business-related property, line 45 0.00 60. Part 6: Total farm- and fishing-related property, line 52 0.00 61. Part 7: Total other property not listed, line 54 4,580.00 4,580.00 62. Total personal property. Add lines 56 through 61, Copy personal property total -> 4,580.00 63. Total of all property on Schedule A/B. Add line 55 + line 62.

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 20 of 57

Fill in this in	formation to	identify your ca	se:			
Debtor 1	Pamela L					
Debtor 2		Middle	Name Last Name			
(Spouse, if filing)			Name Last Name			
	sankruptcy Cour	t for the: Northerr	District of Illinois			
Case number (If known)						Check if this is all amended filing
Official F	orm 106	SC				
Sched	ule C:	The P	roperty You	ı Claim as I	Exempt	04/16
Using the prope	erty you listed d, fill out and a	on <i>Schedule A/E</i> attach to this pag	wo married people are filing 3: Property (Official Form 10 e as many copies of Part 2	06A/B) as your source, list t	he property that you clain	m as exempt. If more
etirement fun- imits the exen	dsmay be ι nption to a pa	ınlimited in doll	mptions—such as those a ar amount. However, if yo amount and the value of the amount.	ou claim an exemption of	100% of fair market val	ue under a law that
Part 1: Id	entify the P	roperty You (Claim as Exempt			
☐ You ar	e claiming sta e claiming fed	te and federal no eral exemptions.	ning? Check one only, ever enbankruptcy exemptions. 1 11 U.S.C. § 522(b)(2) A/B that you claim as exe	11 U.S.C. § 522(b)(3)		
	cription of the A/B that lists	property and lin this property	e on Current value of the portion you own	Amount of the exempt	ion you claim Specil	fic laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for	each exemption.	ewighted and the second of the
Brief description	. <u>Auton</u>	nobile	\$2,000.00	\$ 2,400.00	735 1	LCS 5/12-1001(c)
Line from Schedule	2.1			100% of fair marke any applicable stat		
Brief	. <u>Furnit</u>	ure	\$1,500.00	\$ 1,500.00	735 II	LCS 5/12-1001(b)
description Line from Schedule	6			100% of fair marke		
Brief description	. <u>Clothe</u>	es	<u>\$500.00</u>	_ \$_500.00	735 11	LCS 5/12-1001(a)
Line from Schedule				100% of fair marke any applicable state		
(Subject to	-	nestead exempt	ion of more than \$160,375 ery 3 years after that for ca	5?	e of adjustment.)	
✓ No ☐ Yes. Di ☐ No ☐ Ye	0	the property cov	ered by the exemption with	in 1,215 days before you fil	ed this case?	

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 21 of 57

Debtor 1

Pamela L. King-Fisher
First Name Middle Name Last Name

Case number (if known)

Part 2:

Additional Page

	on of the property and line /B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemptio
		Copy the value from . Schedule A/B	Check only one box for each exemption	
Brief description:	Jewelry	\$300.00	□ \$300.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B:	12		100% of fair market value, up to any applicable statutory limit	
Brief description:	Checking Account	\$	□ \$ 200.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B:	<u>17.1</u>		☐ 100% of fair market value, up to any applicable statutory limit ☐ 100% of fair market value, up to any applicable statutory limit ☐ 100% of fair market value, up to any applicable statutory limit ☐ 100% of fair market value, up to any applicable statutory limit ☐ 100% of fair market value, up to any applicable statutory limit ☐ 100% of fair market value, up to any applicable statutory limit ☐ 100% of fair market value, up to any applicable statutory limit ☐ 100% of fair market value, up to any applicable statutory limit ☐ 100% of fair market value, up to any applicable statutory limit ☐ 100% of fair market value, up to any applicable statutory limit ☐ 100% of fair market value. ☐ 100% of fair marke	The state of the s
Brief description:	Savings Account	\$80.00	\$ 80.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B:	17.3		✓ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$	
Line from Schedule A/B:	1.1		100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<u> </u>	
_ine from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ \$	
ine from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	MATERIAL PROPERTY AND
Brief description:		\$	\$	
ine from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief Jescription:		\$	\$\$ 100% of fair market value, up to	
Line from Schedule A/B:			any applicable statutory limit	
Brief lescription:	- Constitution - Cons	\$	Q \$	
ine from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief lescription:		\$	\$	
ine from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief lescription:		\$	\$ \$ to of fair market value, up to	
.ine from Schedule A/B:			any applicable statutory limit	
3rief		\$	□ \$	
description: ine from		Ψ	100% of fair market value, up to any applicable statutory limit	
Schedule A/B:				. In the second sec

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 22 of 57

Fill in this information to identify your ca	se:			
Debtor 1 Pamela L. King-Fisher				
First Name Middle				
Debtor 2 (Spouse, if filing) First Name Middle	Name Last Name			
United States Bankruptcy Court for the: Northern	District of Illinois			
Case number				
(If known)			☐ Check	if this is an
			amend	led filing
Official Form 106D				
	s Who Have Claims Secur			12/15
Be as complete and accurate as possible information. If more space is needed, cop	If two married people are filing together, both are ed y the Additional Page, fill it out, number the entries,	qually responsible fo	or supplying correct	t Fany
additional pages, write your name and car	se number (if known).	and account to this	Tomi. On the top of	ally
1. Do any creditors have claims secured b	ov vour property?			
☑ No. Check this box and submit this for	m to the court with your other schedules. You have noth	ing else to report on t	his form.	
Yes. Fill in all of the information below.		•		
Part 4: List All Secured Claims				
List Air Secured Claims		Column A	Golumn B	0.0
2. List all secured claims. If a creditor has n	nore than one secured claim, list the creditor separately	Amount of claim	Value of collateral	Column C Unsecured
As much as possible, list the claims in alph	as a particular claim, list the other creditors in Part 2. habetical order according to the creditor's name.	Do not deduct the value of collateral	that supports this claim	portion
2.1				If any
Creditor's Name	Describe the property that secures the claim:	\$	\$	\$0.00
Number Street]		
	As of the date you file, the claim is: Check all that apply. Contingent			
	Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
☐ Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only At least one of the debtors and another	Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit			
	Other (including a right to offset)	_		
Check if this claim relates to a community debt				
Date debt was incurred	Last 4 digits of account number			
2.2	Describe the property that secures the claim:	s0.00	\$ 0.00	s0.00_
Credilor's Name				
Number Street	As of the date you file, the claim is: Check all that apply.	na de		
	Contingent			,
	☐ Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only Debtor 1 and Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			100
_	Other (including a right to offset)			
Check if this claim relates to a community debt				
Date debt was incurred	Last 4 digits of account number		the COS Art State (CoS Art State (Co	BANDAS ORGENTOS SECUNOS PERSONAS ANAMAS POR A C. C. C.
Add the dollar value of your entries in C	column A on this page. Write that number here:	s0.00		-

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 23 of 57

Ī	ill in this i	nformation	to identif	y your case:			3					
D	ebtor 1	Pamela	L. Kin	g-Fisher								
		First Name		Middle Name		Last Name						
	lebtor 2 Spouse, if filing) First Name		Middle Name	~~~~~	Last Name						
U	nited States	Bankruptcy C	ourt for the	: Northern Dis	trict of Illin	iois						
	ase number									Į	Check if t	his is an
	f known)										amended	filing
0	fficial I	Form 1	06E/F	• •								
S	ched	ule E/I	F: Cr	editors	Who) Have	Unsec	ured Clai	ms			12/15
Lis A/E cre nec any	t the other 3: Property ditors with eded, copy additiona	r party to an y (Official Fo h partially s y the Part yo al pages, wr	ny execute orm 106A ecured cl ou need, f 'ite your r	ory contracts /B) and on <i>Sc</i> laims that are	or unexp hedule G listed in ber the e e number	ired leases t : Executory Schedule D: ntries in the (if known).	hat could resu Contracts and Creditors Who	claims and Part 2 fo llt in a claim. Also I Unexpired Leases O Have Claims Sect eft. Attach the Con	list exec (Official <i>ired by l</i>	utory contract Form 106G). Property. If m	ts on Schedu Do not inclue ore space is	<i>ule</i> de any
				unsecured cl								
	-	o to Part 2.	- p.1011ty	U	anna aya	you:						
	Yes.											
	each claim nonpriority unsecured	n listed, iden! / amounts. A I claims, fill d	tify what ty is much as out the Cor	ype of claim it i s possible, list i ntinuation Pag	s. If a clai the claims e of Part	m has both point alphabetic alpha	riority and nonp al order accord none creditor h	insecured claim, list priority amounts, list t ling to the creditor's olds a particular clai	hat clain name, if	n here and sho you have more	w both priority a than two prior	and
	(For an ex	planation of	each type	of claim, see t	the instruc	tions for this	form in the inst	ruction booklet.)	Total	claim Pri	ority No	npriority
	1										And the second s	ount
2.1					Las	t 4 digits of a	ccount number	r	\$	0.00 \$	0.00 \$	0.00
	Priority Cred	ditor's Name				-		·				
	Number	Street		***************************************	VV 1	en was the di	ebt incurred?					
	**************************************	······································	······································	of within the value of the state of the stat	As	of the date yo	ou file, the clain	n is: Check all that app	ly.			ŧ
	City		State	e ZIP Code		Contingent						
	,	urred the del				Unliquidated						:
	Debtor		A: CHECK	AIC.	u	Disputed						
	☐ Debtor				Туј	e of PRIORI	TY unsecured	claim:				
	Debtor	r 1 and Debtor	2 only			Domestic supp						:
	At leas	st one of the d	ebtors and	another		• •	-	ou owe the governmen	t			
	Checi	k if this clain	n is for a c	ommunity deb			-	ury while you were				1
	Is the cla	im subject t	o offset?		-	intoxicated						ĺ
	☐ No				أسأ	Other, Specify			_			The state of the s
	☐ Yes	enthety mattertee stheorem is a holistic or heari-st	anang wanggapanganikatant	s e en est ment nome den talligitation of general de second de second de second de second de second de second	presented to transport about a server server, and ser	epon dila magaziana dast as ambiens tenbanasan q	en e		in igna (premiorismungspecture)		adrijantas killimita kariliji meta killijan over i	mineral constitution of the constitution of th
2.2]	ditor's Name		······································	Las	t 4 digits of a	ccount number	r	\$	0.00 \$	0.00 \$	0.00
	Phonty Cred	altor's (verifie			Wh	en was the de	ebt incurred?					
	Number	Street					Kila dha alaim	n ios Chank all that and	l.,			
							u me, me ciam	n is: Check all that app	ıy.			
	<u> </u>		State	e ZIP Code		Contingent Unliquidated						:
	City					Disputed						
	Who incu	urred the det	rr Uneck (лю.								ato ancieno
	Debtor	•					TY unsecured	claim:				3
		r 1 and Debtor	2 only			Domestic supp	-					1
		st one of the d		another			· ·	ou owe the government	Į.			:
	Check	k if this clain	a is for a c	community deb	at U	Claims for dea intoxicated	th or personal inju	ary while you were				
	Is the cla	im subject t	o offset?			Other, Specify						
	☐ No	-										

Document

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Page 24 of 57

Debtor 1

Pamela L. King-Fisher Middle Name

Last Name

Case number (if known)_

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38. mil		. 107		

List All of Your NONPRIORITY Unsecured Claims

			Cource Osamis				
	Do any creditors have nonpriority ur ☐ No. You have nothing to report in th ☑ Yes						
	List all of your nonpriority unsecured nonpriority unsecured claim, list the cre included in Part 1. If more than one creclaims fill out the Continuation Page of	ditor separa ditor holds a	ately for each claim	i. For each claim listed, identify who	at type of claim it is. Do not	tiet clai	me already
						Total	claim
1	AMEXDSNB			Last 4 digits of account number	7 4 8 1		1,930.00
	Nonpriority Creditor's Name				06/01/2007	\$	1,930.00
	9111 Duke Blvd Number Street			Arnen was the dept incurred:	00.0172.007		
	Mason	ОН	45040				
	City	State	ZIP Code	As of the date you file, the claim	is: Check all that apply.		
				☐ Contingent			
	Who incurred the debt? Check one.			☐ Unliquidated			
	Debtor 1 only			☐ Disputed			
	Debtor 2 only						:
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecu	red claim:		
	At least one of the debtors and another			Student loans			
	☐ Check if this claim is for a commu	nity debt		Obligations arising out of a separa	ation agreement or divorce		•
	Is the claim subject to offset?			that you did not report as priority of Debts to pension or profit-sharing			Í
	☑ No			Other, Specify Credit Card	plans, and other similar debts		
	Yes				, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		i
_	ED SECTION OF CONTROL OF SECTION SECTI		ANNAGA ARTA NA ALBERTA NOMBREEN SE LE LISTEMBREES EN PRESENTA SE LISTEMBREE		erildra, verdenn de en ender rekende meer sammen belik olde rekende bis biland er demokrade man avez	Printer of Helicity (Medicity Const.)	1,938.00
2	Barclays Bank Delaware			Last 4 digits of account number	<u>7 8 5 3</u> 05/01/2007	\$	1,930.00
	Nonpriority Creditor's Name			When was the debt incurred?	03/01/2001		
	PO BOX 8803 Number Street						
	Wilmington	DE	19899	As of the date you file, the claim i	is: Check all that apply.		:
	City	State	ZIP Code	☐ Contingent			
	Who incurred the debt? Check one.			Unliquidated			
	Debtor 1 only			Disputed			:
	Debtor 2 only			·			
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecur	red claim:		
	At least one of the debtors and another			☐ Student loans			
	Check if this claim is for a commun	nitu daht		Obligations arising out of a separa			:
		mty debt		that you did not report as priority of Debts to pension or profit-sharing			:
	Is the claim subject to offset?			Other. Specify Credit Card	plans, and other similar debts		
	Ø No □ Yes						
_				ϕ (4.8), (6.1), with ϕ (6.1), with ϕ (6.1), ϕ	isancia y structures de retremento en concentramismo de la comprehensión de la compreh	onto est se disenta este siente de	Commission of the Commission o
	Bk of Amer			Last 4 digits of account number	_7 _8 _5 _3	\$	2,583.00
	Nonpriority Creditor's Name			When was the debt incurred?	11/01/2012	*	
	PO BOX 982238 Number Street						
	El PAso	TX	79998		20 1 N. 11 1 1 1		
	City	State	ZIP Code	As of the date you file, the claim i	s: Check all that apply.		
	Who incurred the debt? Check one.			Contingent			:
	Debtor 1 only			Unliquidated			:
	Debtor 2 only			☐ Disputed			:
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecur	red claim:		:
	At least one of the debtors and another				va vium.		:
		nitu daht		Student loansObligations arising out of a separa	ation agreement or divorce		
	Check if this claim is for a commun	mey debt		that you did not report as priority of	daims		
	is the claim subject to offset?			Debts to pension or profit-sharing	plans, and other similar debts		
	₩ No			Other. Specify Credit Card			:
	☐ Yes						1

Document

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Page 25 of 57

Debtor 1

Pamela L. King-Fisher Middle Name

Case number (if known)_

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	200					b

Your NONPRIORITY Unsecured Claims - Continuation Page

r listing any entries on this page, nu	- ,-/*			Total cl
Capital One Nonpriority Creditor's Name			Last 4 digits of account number 0 1 1 8	\$_1,95
PO BOX 26625			When was the debt incurred? 03/01/2008	
Number Street Richmond	VA	23261	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Check one. Debtor 1 only	State	ZIP Code	Contingent Unliquidated Disputed	
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another			 Student loans Obligations arising out of a separation agreement or divorce that 	
☐ Check if this claim is for a commur is the claim subject to offset? ☑ No ☐ Yes	nity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	
Comenity Bank/Carsons	NACESTANISTES ASSESSED ASSESSED IN	COMMA AMERICANICAN PARTA ACCIPION STREET AND CONTROL PROPERTY AND CONTRO	Last 4 digits of account number 1 7 1 2	\$ <u>3,25</u>
Nonpriority Creditor's Name			When was the debt incurred? 12/01/1997	
3100 Easton Square PI Number Street			As of the date you file the claim in Check all that and	
Columbus	OH	43219 ZIP Code	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP COUR	☐ Contingent ☐ Unliquidated	
Who incurred the debt? Check one.			Disputed	
Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 2 only Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a commun	ity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?			☑ Other Specify Charge Account	
₩ No Yes				
tanina katalah di antagan perengangan perengan perinda di sati at 1 amin'ny mita matandra dia benjanjah antah di didin	escentario con constructor	egyppung segas berones serasar ten sakenalis Almalik mikilik kelikalik Almalik sakenalik sakenalik s	Last 4 digits of account number 7 8 5 3	\$ <u>10</u>
Comenity Bank/Avenue Nonpriority Creditor's Name		***************************************		
PO BOX 182789			When was the debt incurred? 12/01/2016	
Number Street Columbus	ОН	43218	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check one.			Unliquidated Disputed	
Debtor 1 only			·	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and another			 Student loans Obligations arising out of a separation agreement or divorce that 	
Check if this claim is for a commun	ity deht		you did not report as priority claims	
	acy acut		Debts to pension or profit-sharing plans, and other similar debts Other. Specify Charge Account	
Is the claim subject to offset? ☑ No □ Yes			Uner, Specify Officings Account	

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Page 26 of 57

Debtor 1

Pamela L. King-Fisher First Name Middle Name

Document

Case number (if known)_

Part 2:

Your NONPRIORITY Unsecured Claims - Continuation Page

listing any entries on this page, r	number th	em beginning wit	h 4.4, followed by 4.5, and so forth.	Total clain
Kohls/Capone	·		Last 4 digits of account number 9 3 0 5	_{\$} 2,967.0
Vonpriority Creditor's Name N56 W 17000 Ridgewood Dr			When was the debt incurred? 11/01/1995	
Number Street Menomonee Falls	WI	53051	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check one.			Unliquidated	
Debtor 1 only			☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors and anothe	er		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a comm	unity debt		you did not report as priority claims	
s the claim subject to offset?	·		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Charge Account	
☑ No			Care: Specify Charge 710504Th	
☐ Yes				
Comenity Bank/Victoria Secr	et	and the second seco	Last 4 digits of account number 5 6 3 7	s_1,365.0
onpriority Creditor's Name			When was the debt incurred? 07/01/2012	
PO BOX 182789			When was the debt incurred? 0//01/2012	
lumber Street Columbus	ОН	43218	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
			Unliquidated	
Who incurred the debt? Check one.			☐ Disputed	
Debtor 1 only			Time of NONDDIODITY upage red plains	
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	er		 Student loans Obligations arising out of a separation agreement or divorce that 	
Check if this claim is for a comm	unitu daht		you did not report as priority claims	
	unity debt		Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset?			☑ Other Specify Charge Account	
☑ No ☑ Yes				
LI YES		agoversion ann quaimma ann mhliaiste ann mhliann a na bhinn a na bhinn a bhinn a bhinn a bhinn a bhinn a bhinn		\$ 577.6
Comenity Bank/Meijer			Last 4 digits of account number 8 8 3 0	\$
Ionpriority Creditor's Name		1,,-,	When was the debt incurred? 11/01/2016	
PO BOX 182789			**************************************	
iumber Street Columbus	ОН	43218	As of the date you file, the claim is: Check all that apply.	
ity	State	ZIP Code	☐ Contingent	
			Unliquidated	
Vho incurred the debt? Check one.			☐ Disputed	
Debtor 1 only			Type of NONPRIORITY unsecured claim:	
Debtor 2 only Debtor 1 and Debtor 2 only			J.	
At least one of the debtors and anothe	r		 Student loans Obligations arising out of a separation agreement or divorce that 	
Check if this claim is for a comm			you did not report as priority claims	
	unity dept		Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset? -✓			☑ Other. Specify Charge Account	
Ž I No				

Document

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Page 27 of 57

Debtor 1

Pamela L. King-Fisher
First Name Middle Name

Case number (if known)_

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Your NONPRIORITY Unsecured Claims - Continuation Page

ter listing any entries on this p	page, number the	m beginning witl	n 4.4, followed by 4.5, and so forth.	Total claim
MCYDSNB			Last 4 digits of account number 8 3 4 8	\$_3,700.00
Nonpriority Creditor's Name PO BOX 8218			When was the debt incurred? 09/01/1997	
Number Street Mason	ОН	45040	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check	k one		Unliquidated	
Debtor 1 only	COILE.		☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors an			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Check if this claim is for a	-		Debts to pension or profit-sharing plans, and other similar debts	
is the claim subject to offset? No Yes	•		☑ Other. Specify Charge Account	
SYNCB/JCP		gering (Selection for the American de Selection for the Selection	Last 4 digits of account number 0 8 8 9	\$ 2,960.00
Nonpriority Creditor's Name			05/01/2007	
PO BOX 965007			When was the debt incurred? 05/01/2007	
Number Street Orlando	FL	32896	As of the date you file, the claim is: Check all that apply.	
City	F <u>L</u> State	ZIP Code	□ Contingent	
·			☐ Unliquidated	
Who incurred the debt? Check	cone.		☐ Disputed	
Debtor 1 only			Type of NONPRIORITY unsecured claim:	
Debtor 2 only Debtor 1 and Debtor 2 only				
At least one of the debtors and	d another		 ✓ Student loans ✓ Obligations arising out of a separation agreement or divorce that 	
Check if this claim is for a	community dobt		you did not report as priority claims	
	•		Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset? ✓ No ☐ Yes	•		Other. Specify Charge Account	
SYNCB/Sams Club	द्धार दश्ये प्रश्नामा प्रमाणाच्या प्रमाणाच्या १ तथा प्रमाण प्रमाणाच्या प्रमाणाच्या स्थाप स्थाप स्थाप स्थाप स्थ प्रमाण	a tiplicity o literatura de la marian de la puede de la maria de constituir que de constituir que de la marian	Last 4 digits of account number 4 5 9 9	\$_1,173.00
Nonpriority Creditor's Name			When was the debt incurred? 02/01/2016	
PO BOX 965005			When was the debt incurred? U2/U1/2010	
Number Street	FL	32896	As of the date you file, the claim is: Check all that apply.	
Orlando City	F L State	ZIP Code	Contingent	
•			Unliquidated	
Who incurred the debt? Check	one.		☐ Disputed	
Debtor 1 only			Type of NONPRIORITY unsecured claim:	
Debtor 2 only Debtor 1 and Debtor 2 only				
At least one of the debtors and	d another		Student loans Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a			you did not report as priority claims	
	•		Debts to pension or profit-sharing plans, and other similar debts Other. Specify Charge Account	
Is the claim subject to offset? No Yes			Other. Specify Charge Account	

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Page 28 of 57

Debtor 1

Pamela L. King-Fisher Middle Name

Document

Case number (if known)_

Part 2

Your NONPRIORITY Unsecured Claims — Continuation Page

listing any entries on this page,	nunsper (n	em beginning wit	n 4.4, followed by 4.5, and so forth.	Total cla	
SYNCB/TJX COS DC			Last 4 digits of account number 4 3 6 6	s 805.	
Nonpriority Creditor's Name PO BOX 965005			When was the debt incurred? 07/01/2017	*	
Number Street Orlando	FL	32896	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	☐ Contingent		
Who incurred the debt? Check one.			☐ Unliquidated		
Debtor 1 only			Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only			Student loans		
At least one of the debtors and anoth	er		Obligations arising out of a separation agreement or divorce that		
Check if this claim is for a comm	nunity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
s the claim subject to offset?			Other. Specify Credit Card		
Mo No					
Yes					
SYNCB/Old Navy	1. 22 m a 25 m c c c c c c c c c c c c c c c c c c	Promitive Established State State Consumers Action and Consumers (Consumers)	Last 4 digits of account number 1 8 5 9	s 1,940	
Jonpriority Creditor's Name			00/04/0040		
PO BOX 965005			When was the debt incurred? <u>08/01/2012</u>		
lumber Street Orlando	FL	32896	As of the date you file, the claim is: Check all that apply.		
ely	State	ZIP Code	Contingent		
Vho incurred the debt? Check one.			☐ Unliquidated		
Vno incurred the debt? Check one. ✓ Debtor 1 only			☐ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only			Student loans		
At least one of the debtors and anoth	er		Obligations arising out of a separation agreement or divorce that		
Check if this claim is for a comm	unity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
s the claim subject to offset?			Other. Specify Charge Account		
1 No			The state of the s		
3 Yes	s, a construir o e construir est construir con		HUMPHER GEREN BETTE	edicta a carcactegazione da contra est dife	
SYNCB/Walmart			Last 4 digits of account number 3 2 2 0	_{\$_1,567}	
onpriority Creditor's Name	<u></u>		When was the debt incurred? 05/01/2012		
PO BOX 965024			Trifei was the delta incultou:		
umber Street Drlando	FL	32896	As of the date you file, the claim is: Check all that apply.		
ity	State	ZIP Code	Contingent		
Who incurred the debt? Check one.			Uniquidated		
Debtor 1 only			☐ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only At least one of the debtors and another			☐ Student loans		
			Obligations arising out of a separation agreement or divorce that		
Check if this claim is for a comm	unity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
the claim subject to offset?			Other. Specify Charge Account		
1 No					

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main

Debtor 1

Pamela L. King-Fisher Middle Name

Document

Page 29 of 57 Case number (if known)

Part 2:

Your NONPRIORITY Unsecured Claims - Continuation Page

r listing any entries on this	page, number the	m beginning wit	h 4.4, followed by 4.5, and so forth.	Total clai
SYNCB/Home			Last 4 digits of account number 1 9 1 7	s 2,778.
Nonpriority Creditor's Name PO BOX 965036			When was the debt incurred? 07/01/2013	
Number Street Orlando	FL	32896	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Che	ck one.		☐ Unliquidated ☐ Disputed	
Debtor 1 only Debtor 2 only			Time of MOMPHIODITY	
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim: Student loans	
At least one of the debtors a			Obligations arising out of a separation agreement or divorce that	
Check if this claim is for	a community debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset ☑ No	17		Other Specify Charge Account	
Yes				
SYNCB/ToysRUs	Kita patriokita teknet terta menimana perimpian sepanyan penjengan penjengan penjengan penjengan pe	iilis Lebussiliistee photossuud Aukstaniya dhaastatti tagaay dhaasta Leb	Last 4 digits of account number 4 5 8 6	s 1,516.
Nonpriority Creditor's Name			When was the debt incurred? 11/01/2012	
PO BOX 965005 Number Street			As of the data was fits the slave to Out I will be	
Orlando City	FL State	32896 ZIP Code	As of the date you file, the claim is: Check all that apply.	
•		Zii Code	☐ Contingent☐ Unliquidated	
Who incurred the debt? Chec Debtor 1 only	ck one.		☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors ar	ad a salbas		☐ Student loans	
			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Check if this claim is for	•		Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset ☑ No	7		☑ Other. Specify Charge Account	
Yes				
SYNCB/Pandora	e de la proposition de la proposition de la confession de la confession de la confession de la confession de l		Last 4 digits of account number 4 6 6 2	<u>\$_1,013.</u>
Ionpriority Creditor's Name			When was the debt incurred? 09/01/2014	
950 Forrer Blvd Jumber Street			As of the date you file, the claim is: Check all that apply.	
Kettering Div	OH State	45420 ZIP Code	Contingent	
•			Unliquidated	
Who incurred the debt? Chec ☑ Debtor 1 only	к one.		☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors an	id another		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Check if this claim is for a	community debt		Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset?	?		☑ Other. Specify Charge Account	
Z ÍNo DiYes				

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main

Debtor 1

Pamela	L.	King-Fishe	r
First Name		Middle Name	_

Document

Page 30 of 57

Case number (if known)_

Part 2:

Your NONPRIORITY Unsecured Claims - Continuation Page

er listing any entries on this page, r	umber the	em beginning with	n 4.4, followed by 4.5, and so forth.	Total clair				
SYNCB/BP DC			Last 4 digits of account number 8 4 3 3	\$_4,500.0				
Nonpriority Creditor's Name PO BOX 965024			When was the debt incurred? 06/01/2017					
Number Street Orlando	FL	32896	As of the date you file, the claim is: Check all that apply.					
City	State	ZIP Code	Contingent					
Who incurred the debt? Check one.			Unliquidated					
Debtor 1 only			☐ Disputed					
Debtor 2 only			Type of NONPRIORITY unsecured claim:					
Debtor 1 and Debtor 2 only			☐ Student loans					
At least one of the debtors and another	er •		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 					
☐ Check if this claim is for a comm	unity debt		Debts to pension or profit-sharing plans, and other similar debts					
Is the claim subject to offset?			Other Specify Credit Card					
☑ No ☐ Yes								
SYNCB/Lowes	03.6244.28244/28744 626-2544	egypty, egypty, egypty, vor a var en var en	Last 4 digits of account number 8 1 9 2	<u>\$ 1,700.</u>				
Nonpriority Creditor's Name			When was the debt incurred? 11/01/2012					
PO BOX 965005 Number Street			•					
Orlando	FL	32896	As of the date you file, the claim is: Check all that apply.					
City	State	ZIP Code	Contingent					
Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed					
☑ Debtor 1 only			a Disputed					
Debtor 2 only			Type of NONPRIORITY unsecured claim:					
Debtor 1 and Debtor 2 only At least one of the debtors and another			Student loans					
			Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
☐ Check if this claim is for a comm	unity debt		Debts to pension or profit-sharing plans, and other similar debts					
Is the claim subject to offset? ✓ No ☐ Yes			☑ Other. Specify Charge Account					
	ten est des sociales	ennika karala darik generak pertagai pertagai pertagai sepertu a kana a a assessi setimboli	Last 4 digits of account number 1 7 8 6	\$_2,971.				
TD Bank USA/Target Credit Nonpriority Creditor's Name								
PO BOX 673			When was the debt incurred? 12/01/2006					
Number Street		FF440	As of the date you file, the claim is: Check all that apply.					
Minneapolis City	MN State	55440 ZIP Code	Contingent					
$ \sqrt{n_j} $			Unliquidated					
Who incurred the debt? Check one.			☐ Disputed					
Debtor 1 only			Type of NONPRIORITY unsecured claim:					
Debtor 2 only Debtor 1 and Debtor 2 only			,					
☐ At least one of the debtors and another			 Student loans Obligations arising out of a separation agreement or divorce that 					
☐ Check if this claim is for a community debt			you did not report as priority claims					
	orney usut		Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card					
Is the claim subject to offset? ☑ No ☐ Yes			Omer. Specify Ground Gord					

Document

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Page 31 of 57

Debtor 1

Pamela L. King-Fisher
First Name Middle Name

Case number (if known)_

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Your NONPRIORITY Unsecured Claims - Continuation Page

fisting any entries on this	page, number the	em beginning wit	h 4.4, followed by 4.5, and so forth.	Total	clain
CBNA			Last 4 digits of account number 3 5 3 2	. 4	195.0
onpriority Creditor's Name			00/04/0040	Φ	
PO BOX 6497			When was the debt incurred? 02/01/2013		
umber Street Sioux Falls	SD	57117	As of the date you file, the claim is: Check all that apply.		
ity	State	ZIP Code	Contingent		
			☐ Unliquidated		
Vho incurred the debt? Chec	k one.		☐ Disputed		
Debtor 1 only					
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only			Student loans		
At least one of the debtors ar	id another		Obligations arising out of a separation agreement or divorce that		
Check if this claim is for a	. community dobt		you did not report as priority claims		
	-		Debts to pension or profit-sharing plans, and other similar debts		
the claim subject to offset	?		✓ Other. Specify Charge Account		
No No					
] Yes					
		mada kanalasa karanasa kenandi ka-isoka na na na na na na na na ka		Made School Section Section Sec	STANDONES OF
BNA			Last 4 digits of account number 6 9 3 9	s 6	96.0
onpriority Creditor's Name			<u> </u>	Ψ	
•	- d		When was the debt incurred? 10/01/2007		
0 Northwest Point Ro	3G		AND THE RESIDENCE OF THE PROPERTY OF THE PROPE		
Elk Grove Village	11_	60007	As of the date you file, the claim is: Check all that apply.		
IN Glove village	State	ZIP Code	Contingent		
*			Unliquidated		
ho incurred the debt? Chec	k one.		Disputed		
Debtor 1 only			— горина		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only					
At least one of the debtors an	d another		Student loans		
			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
Check if this claim is for a	community debt		Debts to pension or profit-sharing plans, and other similar debts		
the claim subject to offset?	•		Other Specify Credit Card		
Í No			The state of the s		
Yes					
aar ee droeid o e laad keep leef een de laad ta groon tot ook een de laad bekeel ta groon tot ook een de laad b					00.0
Comcast			Last 4 digits of account number 7 8 5 3	\$	
OFFICASI popriority Creditor's Name			THAN .		
O BOX 3001			When was the debt incurred? 09/01/2017		
Mber Street					
Southeastern	PA	19398	As of the date you file, the claim is: Check all that apply.		
by the astern	State	ZIP Code	Contingent		
•			☐ Unliquidated		
ho incurred the debt? Chec	cone.		Disputed		
Debtor 1 only			·		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only			Student loans		
At least one of the debtors an	d another		 Student loans Obligations arising out of a separation agreement or divorce that 		
		-	you did not report as priority claims		
Check if this claim is for a	community debt		Debts to pension or profit-sharing plans, and other similar debts		
the claim subject to offset?	•		Other Specify Cable		
No					
4 (30)					

Document

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Page 32 of 57

Debtor 1

Pamela L. King-Fisher
First Name Middle Name

Case number (if known)

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			SAM

Your NONPRIORITY Unsecured Claims — Continuation Page

r listing any entries on this page, nur	mber ther	m beginning with	4.4, followed by 4.5, and so forth.	Tol	tal clai
Advocate Medical Group Nonpriority Creditor's Name			Last 4 digits of account number 7 8 5 3	\$	27.
PO BOX 92523			When was the debt incurred? 03/15/2017		
Number Street Chicago	IL	60675	As of the date you file, the claim is: Check all that apply.		
City Who incurred the debt? Check one. Debtor 1 only	State	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only At least one of the debtors and another			Student loans		
☐ Check if this claim is for a commun is the claim subject to offset?	ity debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical 		
Mo ☑ Yes					
Terri L Foster	NGP 960 Nethers Nor Color Colors	ST GOVERNMENT OF THE STATE OF T	Last 4 digits of account number 7 8 5 3	\$	24
Nonpriority Creditor's Name 4440 Lincoln Hwy Suite 102	····		When was the debt incurred? 05/25/2017		
Number Street	11	60443	As of the date you file, the claim is: Check all that apply.		
	IL State	ZIP Code	☐ Contingent		
Who incurred the debt? Check one.			☐ Unliquidated		
Debtor 1 only			Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only			☐ Student loans		
At least one of the debtors and another			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
Check if this claim is for a communi	ity debt		Debts to pension or profit-sharing plans, and other similar debts		
is the claim subject to offset?			☑ Other Specify Medical		
Yes				andelen in skipster in to de se	operation to define de
Von Maur			Last 4 digits of account number 8 5 3 1	\$	64.
Nonpriority Creditor's Name 6565 Brady Street			When was the debt incurred? $\frac{09/01/2017}{}$		
lumber Street	1.6	52806	As of the date you file, the claim is: Check all that apply.		
	IA State	ZIP Code	Contingent		
,			Unliquidated		
Who incurred the debt? Check one.			☐ Disputed		
Debtor 1 only			Type of NONPRIORITY unsecured claim:		
Debtor 2 only Debtor 1 and Debtor 2 only					
At least one of the debtors and another			Student loans Obligations arising out of a separation agreement or divorce that		
Check if this claim is for a communi	ity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
s the claim subject to offset?			Other Specify Collection Account		
¥U No ☐ Yes					

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main

Document

Page 33 of 57

Debtor 1

King-Fisher Middle Name

Case number (if known)_

Part 2:

Your NONPRIORITY Unsecured Claims - Continuation Page

A Committee of the comm				20032003.89028008	, eponing CNVES
Best Buy Credit Service	е		Last 4 digits of account number 1 3 3 7	\$7	741.0
Nonpriority Creditor's Name PO BOX 78009			When was the debt incurred? 09/01/2017		
Number Street Phoenix	AZ	85262	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
Who incurred the debt? Chec	ck one		☐ Unliquidated ☐ Disputed		
☑ Debtor 1 only			☐ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only At least one of the debtors a	ad anathar		Student loans		
			 Obligations arising out of a separation agreement or divorce you did not report as priority claims 	that	
Check if this claim is for	•		Debts to pension or profit-sharing plans, and other similar de	bts	
Is the claim subject to offset	?		Other. Specify Charge Account		
☑ No ☐ Yes					
oyyanyan amiyosia osaataa amiinii ya kamaa kakaman da maxtaada kalkan adigiindoo da kalkan babbabbabababababab	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Proper wy woman construction & various contraction of the contraction			randonasias area
Hama Danet Cradit So	mánn		Last 4 digits of account number 3 6 8 5	s 4	134.0
Home Depot Credit Se Nonpriority Creditor's Name	rvice			¥	<u> </u>
PO BOX 78011			When was the debt incurred?		
Number Street Phoenix	AZ	85062	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
Who incurred the debt? Chec			Unliquidated		
Debtor 1 only	k one.		☐ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only			☐ Student loans		
At least one of the debtors ar	nd another		 Obligations arising out of a separation agreement or divorce tyou did not report as priority claims 	hat	
Check if this claim is for a	community debt		Debts to pension or profit-sharing plans, and other similar del	ots	
Is the claim subject to offset	?		Other Specify Charge Account		
☑ No ☐ Yes					
THE THE WAY SO SEED ON THE OWN THE CONTRACT OF	metaleng ook mins et et mooren met Vetting betekt hellen	为大型的 1845 (1845 1845) 1845 1845 1845 1845 1845 1845 1845 1845		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	85.00
E.R.A			Last 4 digits of account number 7 8 5 3	\$	00.00
Nonpriority Creditor's Name			When was the debt incurred? 09/01/2017		
2601 W. Forrest Hill					
Number Street Peoria	IL	61604	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
Who incurred the debt? Chec	k one		☐ Unliquidated☐ Disputed		
Debtor 1 only			☐ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only			☐ Student loans		
At least one of the debtors an			 Obligations arising out of a separation agreement or divorce t you did not report as priority claims 	hat	
Check if this claim is for a	community debt		Debts to pension or profit-sharing plans, and other similar deb	ots	
Is the claim subject to offset	?		Other Specify Foot & Ankle Clinic		
☑ No					

Case 17-29025 Doc 1

Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main

Pamela L. King-Fisher First Name Middle Name

Document

Page 34 of 57

Case number (if known)

Part 3

Debtor 1

List Others to Be Notified About a Debt That You Already Listed

AFNI Name		**************************************	On which entry in Part 1 or Part 2 did you list the original creditor?					
PO BOX 3097			Line 6.6. of (Check analy T) Part 1: Craditors with Priority Unrecovered Claims					
Number Street		The state of the s	Line 6.6 of (Check one): Part 1: Creditors with Priority Unsecured Cl. 2 Part 2: Creditors with Nonpriority Unsecured					
			Part 2. Creditors with Nonphority Orisecured Clair					
Bloomington	IL.	61702	Last 4 digits of account number 7 8 5 3					
City	State	ZIP Code						
Name			On which entry in Part 1 or Part 2 did you list the original creditor?					
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims					
Number Street			Part 2: Creditors with Nonpriority Unsecured					
		***************************************	Claims					
City	State	ZIP Code	Last 4 digits of account number					
			On which entry in Part 1 or Part 2 did you list the original creditor?					
lame			Line of (Check anal): D. Dart 1: Craditors with Driarity Unaccured Claims					
lumber Street	······································	***************************************	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured					
			Claims					
		My 10. 20.	Last 4 digits of account number					
#y	State	ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?					
lame								
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims					
lumber Street			Part 2: Creditors with Nonpriority Unsecured Claims					
			Last 4 digits of account number					
City 	State	ZIP Code						
Vame		*******************************	On which entry in Part 1 or Part 2 did you list the original creditor?					
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims					
lumber Street			Part 2: Creditors with Nonpriority Unsecured					
			Claims					
	04-4-	7ID Codo	Last 4 digits of account number					
ALV Application of the second second Second second	State	ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?					
Name			•					
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims					
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims					
STATE OF THE STATE			Local desirity of appoint number					
Orty	State	ZIP Code	Last 4 digits of account number					
			On which entry in Part 1 or Part 2 did you list the original creditor?					
Name			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims					
Number Street			Part 2: Creditors with Nonpriority Unsecured					
			Claims					
			Last 4 digits of account number					
Dity	State	ZIP Code	PROFIT AIRTO AS MACANIES MINISTER CONTRACTOR					

Document

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Page 35 of 57

Debtor 1

Pamela L. King-Fisher

Middle Name

Case number (if known)

Part 4

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims from Part 1	6a. Domestic support obligations	6a.	\$	0.00
	6b. Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$	0.00
	6e. Total . Add lines 6a through 6d.	6e.	\$	0.00
			Total claim	
Total claims	6f. Student loans	6f.	\$	0.00
from Part 2	g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ \$	46,182.00
	6j. Total. Add lines 6f through 6i.	6j.	\$	46,182.00

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 36 of 57

	ili in tois ir	formation to	identify your	case:						
D	ebtor	Pamela L	King-Fis	her ddle Name	Last Name					
	ebtor 2 ipouse If filing)	First Name	Min	Idle Name	Last Name					
U	nited States	Bankruptcy Cour		ern District of Illir						
	ase number			·····	*********					[] O. 1.111
	f known)									Check if this is an amended filing
_	CC:: I. F	- 400								
		orm 106					_			
5	chedi	ile G: E	execute	ory Con	tracts an	d Un	expire	Leas	es	12/15
info	ormation. If	f more space	is needed, co	e. If two married py the addition ase number (if I	I people are filing al page, fill it out, known).	together number	r, both are equa the entries, and	ally responsil d attach it to	ole for supp this page. O	lying correct n the top of any
1.	₩ No. C	heck this box a	and file this for	ts or unexpired m with the court	leases? with your other schontracts or leases	iedules. Y	You have nothing	g else to repo	t on this form	n.
2.	List separ	rately each pe rent, vehicle	erson or comp	any with whom	you have the co	ntract or	lease. Then sta	ate what each	contract or	
			92.0	· · · · ·		nasjo i nasjonir	te i teai			en e
	Person o	r company wi	th whom you	have the contra	act or lease		State what the	ne contract o		
2.1		•								
	Name									
	Number	Street	·		***************************************					
	City		State	ZIP Code						
2.2	ncers economissions/energy evene	Will relieved in Chartesters that residence construction	control or an annual or facilities and the	ation to the desired management of the second secon	annessan neerilanessa seessa massimmässä saitaila senee	errore de la company de la	and a second of a common of a common of a common of the second of the se	nor-42 metrological indicatori peloelisti (144-42m	t with the first of the significant that was	ektionkimis yvas mis ana da vikionka tuken esti onenetyva nest od kovasta a vistista altokal milli o
	Name									
	Number	Street				_				
:	City		State	ZIP Code						
2.3		والمقارب المناز المعام منتاه مداره والمناز المعاملة والمناز وا	g menne se met en en eg en se promisio e se en	a e e mentre a demons de la comencia de la comença de la comencia de la comencia de la comencia de la comencia	ومناكبين في مقاله والمنافر ولينه أديره بماليستم والأشاهم بو وساوط و بيونا و و	t net e entoet tot fet tot fend			Anna de Antonio de Caraller de	en e
	Name									
:	Number	Street				de tot				
	City		State	ZIP Code			eta martuma - eta da al Austra (Colora do Colora d	uska essa essa essa essa essa essa essa e		og nyggegyp ywnio ylangegyb Adonadd Daf VII. Riferdersfoldd Gillet V V V
2.4		14 TO 15								
	Name									
•	Number	Street	<u> </u>	WALLEY TO THE TOTAL PROPERTY OF THE TOTAL PR	A	recition/dov/				
1000100	City		State	ZIP Code			may maka a kabada da da qay a sa ka ka sa	to a summa or must refer of the first and a summer	gangera sheeshay are fir finise baha	kega kegangan pagamin sangsapi kasang masantahan kahiliman libili dalah atau dibili san sabira sa sa
2.5										
:	Name									
	Number	Street			44494-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4					
	City	····	State	ZIP Code						

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 37 of 57

Fill in this	s information to ider	ntify your case:			
Debtor 1		(ing-Fisher			
Debtor 2	First Name	Middle Name	Last Name		
	Ing) First Name	Middle Name	Last Name		
United Stat	es Bankruptcy Court for	the: Northern District of Illino	nis		
Case numb	er		No. No. of the same		
(5 87047)	, 274-2400001				k if this is ar ided filing
Official	l Form 106H			anen	ded ming
····		_ ur Codebtors			
Codebtors are filing to and numbe	are people or entitie	es who are also liable for a ually responsible for suppl poxes on the left. Attach th	ny debts you may have. B	e as complete and accurate as possible. If two m f more space is needed, copy the Additional Pag age. On the top of any Additional Pages, write yo	e fill it out
1. Do you	ı have any codebtor	s? (If you are filing a joint ca	ise, do not list either spouse	as a codebtor.)	
Ø No					
☐ Ye					
: 2. Within : Arizoni	the last 8 years, hav a, California, Idaho, L	ve you lived in a communi t ouisiana, Nevada, New Mex	ty property state or territor tico, Puerto Rico, Texas, Wa	y? (<i>Community property states and territories</i> includ shington, and Wisconsin.)	е
	Go to line 3.		,,,	oranigeon, and visconomic,	-
		ormer spouse, or legal equiv	alent live with you at the time	?	:
	No				1
	Yes. In which commi	unity state or territory did yo	u live?	Fill in the name and current address of that perso	n.
	Name of your spouse, form	ner spouse, or legal equivalent		_	
	Number Street			-	
				···	:
	City	State	ZIP Code		
shown Sched	in line 2 again as a ule D (Official Form	codebtor only if that perso	on is a guarantor or cosign	or if your spouse is filing with you. List the perso er. Make sure you have listed the creditor on Jule G (Official Form 106G). Use Schedule D,	in the state of th
Colun	on 1: Your codebtor			Column 2: The creditor to whom you owe	the debt
				Check all schedules that apply:	
3.1					
Name		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Schedule D, line	
Numb	er Street			Schedule G, line	1971
110110	51 51155.			Grieddie G, line	
City		Stale	ZIP Code		
3.2				Schedule D, line	
Name				☐ Schedule E/F, line	
Numb	er Street			Schedule G, line	
-		Plate	ZIP Code		
3.3 City	eky a skultura a garaniana a kunkulu kwa kunkulu a khipiya a maja kilika a kwaka a da a da a	State	ZIT COUR	anningan and the substitution of property and the substitution of	
Name				Schedule D, line	wegenteed
IVARILE				☐ Schedule E/F, line	Therefore the state of the stat
Numb	er Street	Particular (1)		☐ Schedule G, line	-
-		Pists	ZID Codo		

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 38 of 57

Fill in this inform	ation to identif	y your case:						
Debtor 1 Pan	nela L. Kin	g-Fisher		400/000000				
First N		Middle Name	Last Name					
Debtor 2 (Spouse, if filing) First N	eme	Middle Name	Last Name					
United States Bankru	ptcy Court for the:	Northern District of Illinois						
Case number					Cr	neck if th	nie ie:	
(If known)							ended filing	
		- 1944 State - 194				A supp	lement showing pos	
Official Form	1061	***					D/ YYYY	
Schedul	e I: You	ur Income						12/15
supplying correct i If you are separate separate sheet to the	nformation. If y I and your spo	ossible. If two married pector are married and not filings with you, one top of any additional pagenent	ng jointly, and yo do not include inf	ur sp orma	ouse is livin	g with yo	ou, include informationse. If more space is r	on about your spouse.
Fill in your emp information.	oyment		Debtor 1		Mary N Na A		Debtor 2 or non-f	iling spouse
If you have more attach a separate information abou employers.	page with	Employment status	☑ Employed ☐ Not employe	ed		and the second s	Employed Not employed	makkupilakan oleh dimenderi di menderi di menderi di menderi menderi menderi menderi menderi menderi menderi m
Include part-time self-employed we			Driver					
Occupation may or homemaker, if		Occupation	Drivei			·	· · · · · · · · · · · · · · · · · · ·	
: :		Employer's name	Alpha School	Bus	s Co			
		Employer's address	4702 Midlotha Number Street	an T	urnpike		Number Street	
							WWW.	
· :			Crestwood	Stat		1445	City	State ZIP Code
:		How long employed ther	e? 29yrs				29yrs	
Par 21 Give	Notaile Ahou	t Monthly Income						
Estimate month spouse unless your nor	y income as of u are separated -filing spouse h	the date you file this form	r, combine the info					
					For Debt	tor 1	For Debtor 2 or non-filing spouse	
2. List monthly gradeductions). If n	oss wages, sal ot paid monthly,	ary, and commissions (be calculate what the monthly	fore all payroll wage would be.	2.	\$1,49 <u>2</u>	2.00	\$	
3. Estimate and if	st monthly ove	rtime pay.		3.	+s	0.00	+ \$	
4. Calculate gross	income. Add l	ine 2 + line 3.		4.	\$1,492	2.00	\$	

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Mair Document Page 39 of 57

Pamela L. King-Fisher Debtor 1 Case number (if know For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here 1,492.00 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 149.00 5a. 5b. Mandatory contributions for retirement plans 5b. 0.00 5c. Voluntary contributions for retirement plans 0.00 5c 5d. Required repayments of retirement fund loans 0.00 5d. 0.00 5e. Insurance 5e 5f. Domestic support obligations 0.00 5f. 0.00 5g. Union dues 5g. 5h. Other deductions. Specify: 0.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. 149.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 1,343.00 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total 0.00 monthly net income. 8a 0.008b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce 0.00 settlement, and property settlement. 80 0.00 8d. Unemployment compensation 8d. 8e. Social Security 604.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 0.00 8f. Specify: 8g. Pension or retirement income 8g. 0.00 0.00 8h. Other monthly income. Specify: _ 8h. 604.00 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. Calculate monthly income. Add line 7 + line 9. 1,947.00 1,947.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 0.00 11. + Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 1,947.00 Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12. Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? M No. 🔲 Yes. Explain:

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 40 of 57

Fill in this information to identify	your case:			
Debtor 1 Pamela L. King-	Fisher Middle Name Last Name	Check if this	is:	
Debtor 2		——— An amen		
(Spouse, if filing) First Name	Middle Name Last Name	1	ment showing post	petition chapter 13
United States Bankruptcy Court for the: I	Northern District of Illinois		s as of the following	
Case number (If known)	A Maria Mari	MM / DD /	YYYY	
Official Form 106J				
Schedule J: You	ır Expenses			12/15
Be as complete and accurate as po information. If more space is neede (if known). Answer every question.	ssible. If two married people are fili d, attach another sheet to this form	ng together, both are equally res . On the top of any additional pag	ponsible for supply ges, write your nam	ing correct e and case number
Part 41 Describe Your Hou	sehold			
1. Is this a joint case?				
☑ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a s	eparate household?			
□ No	•			
<u> </u>	Official Form 106J-2, Expenses for S	eparate Household of Debtor 2.		
2 Do you have dependents?	☑ No	Dependent's relationship to	Danandantie	Done dependent live
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents'				No Yes
names.				□ No
				Yes
				□ No
				U Yes □ No
			***************************************	Yes
				□ No
	······································			☐ Yes
3 Do your expenses include expenses of people other than yourself and your dependents?	☑ No □ Yes	yan ang mang agan kan an a	and a farther than the state and a state a	
Part 4 Estimate Your Ongoin	na Monthly Expenses			
Estimate your expenses as of your expenses as of a date after the bank	bankruptcy filing date unless you a			
applicable date. Include expenses paid for with non-	novernment assistance if you	know the value of		
such assistance and have included			Your expe	nses
4. The rental or home ownership examples any rent for the ground or lot.	xpenses for your residence. Include	first mortgage payments and	**************************************	800.00
If not included in line 4:				0.00
4a. Real estate taxes			4a. \$	0.00
4b. Property, homeowner's, or re	nter's insurance		4b. \$	0.00
4c. Home maintenance, repair, a	nd upkeep expenses		4c. \$	0.00
4d. Homeowner's association or	condominium dues		4d. \$	0.00

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 41 of 57

Deblor 1 Pamela L. King-Fisher Case number (if known)______

			Your expe	nses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6.	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	150.00
	6b. Water, sewer, garbage collection	6b.	\$	50.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	
	6d. Other. Specify:	6d.	\$	
7.	Food and housekeeping supplies	7.	\$	300.00
8.	Childcare and children's education costs	8.	\$	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	75.00
10.	Personal care products and services	10,	\$	100.00
11.	Medical and dental expenses	11.	\$	0.00
12.	Transportation. Include gas, maintenance, bus or train fare.		¢	160.00
	Do not include car payments.	12.	Φ	
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Charitable contributions and religious donations	14.	\$	25.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	40.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	100.00
	15d. Other insurance. Specify:	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	0.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.			
	Specify:	19.	\$	0,00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	e.		
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	
	20c. Property, homeowner's, or renter's insurance	20c.	\$	
	20d Maintenance, repair, and upkeep expenses	20d.	\$	
	20e. Homeowner's association or condominium dues	20e.	\$	0.00

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 42 of 57

Di	ebtor 1		Pamela L. King-Fisher First Name Neiddle Name Last Name	Case number (if known)		
21.	Oth	er. Sj	pecify:	21.	+\$	0.00
22.	Calc	culate	your monthly expenses.			and the second second final and addition, and combine or accounts are a second second combine on combine of the
	22a.	Add	lines 4 through 21.	22a.	\$	1,900.00
	22b.	Сору	y line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$	0.00
	22c.	Add	line 22a and 22b. The result is your monthly expenses.	22c.	\$	1,900.00
23.			your monthly net income.		¢.	1,947.00
	23a.	Сор	y line 12 (your combined monthly income) from Schedule I.	23a.	Ψ	
	23b.	Сор	y your monthly expenses from line 22c above.	23b.	- \$	1,900.00
	23c.	Sub	tract your monthly expenses from your monthly income.		<u>~</u>	47.00
		The	result is your monthly net income.	23c.	<u> </u>	77.00
24.	Do ye	ou ex	pect an increase or decrease in your expenses within the year after you file	this form?		
		,	ole, do you expect to finish paying for your car loan within the year or do you expe payment to increase or decrease because of a modification to the terms of your n	•		
	2 N	0.			n o an an ann an	
	☐ Ye	es.	Explain here:			
						10.1
						To a Wood of Article

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 43 of 57

Fill in this information to identify your case:		
Debtor 1 Pamela L. King-Fisher		
First Name Middle Name Debtor 2	Last Name	
Spouse, if filing) First Name Middle Name	Last Name	
fnited States Bankruptcy Court for the: Northern District of Illinois		
ase number f knawn)		
The state of the s		eck if this is ended filing
Official Form 106Dec		
Declaration About an Ind	lividual Debtor's Schedules	12/15
If two married people are filing together, both are equally	responsible for supplying correct information	
You must file this form whenever you file hankruntey sch	nedules or amended schedules. Making a false statement, concealing pr	
Sign Below		
Did you pay or agree to pay someone who is NOT an a	attorney to help you fill out bankruptcy forms?	
☑ No	and the same of th	
Yes. Name of person		
		d
	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).	d
		d
		d
Under penalty of perjury, I declare that I have read the		d
Under penalty of perjury, I declare that I have read the that they are true and correct.	Signature (Official Form 119).	d
that they are true and correct.	Signature (Official Form 119).	d :
* tamely King-Tushey	Signature (Official Form 119).	d :
that they are true and correct.	Signature (Official Form 119).	d ::

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 44 of 57

Debtor 1 Pamela L. King-Fisher		CONTROL CONTRO	
First Name Middle Name Debtor 2	Last Name		
(Spouse, if filing) First Name Middle Name	Last Name		
United States Bankruptcy Court for the: Northern District			
Case number (If known)			☐ Check if this is an
			amended filing
Official Form 107			
Statement of Financial Affa	irs for Indiv	iduals Filing for Bankrupto	y 04/10
e as complete and accurate as possible. If two maniformation. If more space is needed, attach a sepumber (if known). Answer every question.	arate sheet to this fo	m. On the top of any additional pages, write your	
Part 1: Give Details About Your Marital S	tatus and Where Y	ou Lived Before	
1. What is your current marital status?			
✓ Married☐ Not married			
₩ No			
Yes. List all of the places you lived in the last: Debtor 1:	3 years. Do not include Dates Debtor 1 lived there	e where you live now. Debtor 2:	Dates Debtor 2 lived there
Yes. List all of the places you lived in the last	Dates Debtor 1		lived there
☐ Yes. List all of the places you lived in the last: Debtor 1:	Dates Debtor 1	Debtor 2:	
Yes. List all of the places you lived in the last	Dates Debtor 1 lived there	Debtor 2:	lived there Same as Debtor 1
Yes. List all of the places you lived in the last	Dates Debtor 1 lived there	Debtor 2:	lived there Same as Debtor 1 From
Yes. List all of the places you lived in the last	Dates Debtor 1 lived there	Debtor 2:	lived there Same as Debtor 1 From
Pebtor 1: Number Street	Dates Debtor 1 lived there	Debtor 2: Same as Debtor 1 Number Street	lived there Same as Debtor 1 From
Pebtor 1: Number Street City State ZIP Code	Dates Debtor 1 lived there	Debtor 2: Same as Debtor 1 Number Street City State ZIP Code	lived there Same as Debtor 1 From To
Pebtor 1: Number Street	Dates Debtor 1 lived there From To	Debtor 2: Same as Debtor 1 Number Street City State ZIP Code	Iived there Same as Debtor 1 From To Same as Debtor 1
Pebtor 1: Number Street City State ZIP Code	Dates Debtor 1 lived there From To From	Debtor 2: Same as Debtor 1 Number Street City State ZIP Code	From Same as Debtor 1 From To Same as Debtor 1 From 1
Pebtor 1: Number Street City State ZIP Code	Dates Debtor 1 lived there From To From	Debtor 2: Same as Debtor 1 Number Street City State ZIP Code	From Same as Debtor 1 From To Same as Debtor 1 From From Same Sam
Pebtor 1: Number Street City State ZIP Code Number Street City State ZIP Code Within the last 8 years, did you ever live with a states and territories include Arizona, California, Inc.	Prom To	Debtor 2: Same as Debtor 1 Number Street City State ZIP Code Number Street City State ZIP Code	Iived there Same as Debtor 1 From To Same as Debtor 1 From To (Community property
Debtor 1: Number Street City State ZIP Code City State ZIP Code	Prom To To spouse or legal equidaho, Louisiana, Neva	Debtor 2: Same as Debtor 1 Number Street City State ZIP Code Number Street City State ZIP Code Valent in a community property state or territory? da, New Mexico, Puerto Rico, Texas, Washington, and	Iived there Same as Debtor 1 From To Same as Debtor 1 From To (Community property

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 45 of 57

or 1 Pamela L. King-Fisher First Name Middle Name Last	Name	Case nu	mber (if known)	***
Did you have any income from employmer Fill in the total amount of income you received If you are filing a joint case and you have inco	d from all jobs and all busin	nesses, including part-tir	me activities.	idar years?
No✓ Yes. Fill in the details.				
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips	\$	Wages, commissions, bonuses, tips	\$
	☐ Operating a business ☐ Wages, commissions,		Operating a business Wages, commissions,	
For last calendar year: (January 1 to December 31, 2016	bonuses, tips Operating a business	\$2,100.00	bonuses, tips Operating a business	\$
For the calendar year before that:	☑ Wages, commissions,		☐ Wages, commissions,	
(January 1 to December 31, 2015	bonuses, tips Operating a business	\$	bonuses, tips Operating a business	\$
List each source and the gross income from e Mo Yes. Fill in the details.		o not include income that		
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:		\$		
		Ψ		\$
the date you med for buildings.		\$ \$		\$ \$ \$
		\$		\$\$ \$\$
For last calendar year: (January 1 to December 31, 2016		\$		\$\$ \$\$ \$\$ \$\$
For last calendar year: (January 1 to December 31, 2016 YYYY		\$\$ \$\$ \$\$		\$\$ \$\$ \$\$
For last calendar year: (January 1 to December 31,2016)		\$\$ \$\$ \$\$		\$\$ \$\$ \$\$ \$\$

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 46 of 57

Debtor 1	Pan First N		ng-Fisher	Lasi Name		_ Ca	ise number (if known)	
Partist	List	Certain Pay	ments You	Made Befor	e You Filed	for Bankruptcy		
	.,	**************************************						A
6. Are eith	her De	btor 1's or D	ebtor 2's deb	ts primarily co	onsumer deb	ts?		
☐ No.	"incu	irred by an ind	lividual primar	ily for a person	at, family, or t	nousehold purpose."	s are defined in 11 U.S.C. § 10	1(8) as
	Durii	ng the 90 days	s before you fi	led for bankrup	tcy, did you p	ay any creditor a tota	l of \$6,425* or more?	
		No. Go to line	7.					
		total amoi	unt you paid tl	hat creditor. Do	not include p	ayments for domestic	ne or more payments and the support obligations, such as or this bankruptcy case.	
	* Sul					-	or after the date of adjustment.	
⊠ Yes	. Debi	tor 1 or Debto	or 2 or both h	ave primarily	consumer de	ebts.		
	Durir	ng the 90 days	before you fi	led for bankrup	tcy, did you p	ay any creditor a total	of \$600 or more?	
	Ø N	No. Go to line	7.					
		creditor, E	o not include	payments for d	tomestic supp	\$600 or more and the port obligations, such ey for this bankruptcy		
					Dates of payment	Total amount paid	Amount you still owe	Was this payment for
						\$	\$	☐ Mortgage
		Greditor's Name						Car
		Number Street						Credit card
								Loan repayment
								Suppliers or vendors
		Ğity	State	ZIP Code				Other
						- 1 1	and the second s	and the state of the same of
					<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	\$	\$	☐ Mortgage
		Creditor's Name						Car
		Number Street						Credit card
								Loan repayment
								Suppliers or vendors
		City	State	ZIP Code				Other
							and the second second second second	and the second
						\$	\$	☐ Mortgage
		Creditor's Name						☐ Car
					***************************************			Credit card
		Number Street						Loan repayment
								☐ Suppliers or vendors
		City	State	ZIP Code				Other
		City	ਹਾਰਵ	Zir Oddo				

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 47 of 57

er 1		King-Fisher	Last Name			Case number (if known)
nsidei orpor igent, uch a	rs include your related a rations of which you including one for a child support and	atives; any gen u are an office a business you	neral partners; i r, director, pers	elatives of any son in control, o	general partners; or owner of 20% or	partnerships of which more of their voting	who was an insider? ch you are a general partner; g securities; and any managing or domestic support obligations,
No Ye) es. List all payment	s to an insider.					
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Ĩr	nsider's Name		······································	-harmonie or neuronalista.	\$	\$	
И	lumber Street			*			The state of the s
		11 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C 1		MATABATE PORTE OF A STATE OF A ST			
Ċ	tity	State	ZIP Code		,		
200	and and an Albana				\$	\$	The state of the s
	umber Street						
	W.M.L. W.			THE CONTRACT OF THE CONTRACT O			
	ily	State	ZIP Code	TEAT, ESSENTE TEATS (ESSENTED AND ASSESSED AND ASSESSED AND ASSESSED ASSESSED.			
ithin n insi clude 1 No	1 year before you ider? e payments on deb	ı filed for ban Is guaranteed	kruptcy, did yo		payments or trans Total amount paid		n account of a debt that benefited Reason for this payment Include creditor's name
ithin n insi clude No Yes	1 year before you ider? e payments on deb	ı filed for ban Is guaranteed	kruptcy, did yo	an insider. Dates of	Total amount	Amount you still	Reason for this payment
ithin n insi clude No Yes	1 year before you ider? e payments on deb s. List all payments	ı filed for ban Is guaranteed	kruptcy, did yo	an insider. Dates of	Total amount	Amount you still owe	Reason for this payment
ithin n insi clude No Yes	1 year before you ider? e payments on deb s. List all payments sider's Name	a filed for bands guaranteed that benefited	kruptcy, did yo	an insider. Dates of	Total amount	Amount you still owe	Reason for this payment
ithin n insi clude No Yes	1 year before you ider? e payments on deb s. List all payments sider's Name	ı filed for ban Is guaranteed	kruptcy, did yo or cosigned by d an insider.	an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment
ithin insiclude	1 year before you ider? e payments on deb s. List all payments sider's Name	a filed for bands guaranteed is that benefited	kruptcy, did yo or cosigned by d an insider.	an insider. Dates of	Total amount	Amount you still owe	Reason for this payment
ithin n insicude No Yes	1 year before you ider? e payments on deb s. List all payments umber Street	a filed for bands guaranteed is that benefited	kruptcy, did yo or cosigned by d an insider.	an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 48 of 57

Identify Legal Actions, Repo	ssessione	, and Foreclosur	ne e		
thin 1 year before you filed for bankru t all such matters, including personal injudiced t contract disputes.	uptcy, were	you a party in any l	awsuit, court action, or	administrative proceed paternity actions, suppo	ding? rt or custody modifica
No					
Yes. Fill in the details.		of the case	Court or agency		Status of the case
Case title			Court Name		— Pending
			Courtieme		On appeal
			Number Street		Concluded
Case number	And but to the second s		City	State ZIP Code	_

Case title			Court Name		─ ☐ Pending☐ On appeal
	1000 1000		Number Street	***************************************	Concluded
Case number					_
			City	State ZIP Code	
Yes. Fill in the information below.					
Yes. Fill in the information below.		Describe the proper	v	Date	Value of the property
Yes. Fill in the information below.		Describe the proper	ty	Date	Value of the property
Yes. Fill in the information below. Creditor's Name	or - Name of the Inches of the Name of			and any file or manifold has been a	Value of the property
				and any file or manifold has been a	Value of the property
Creditor's Name		Explain what happer	ned epossessed.	and any file or manifold has been a	Value of the property
Creditor's Name		Explain what happer	ned epossessed. oreclosed.	and any file or manifold has been a	Value of the property
Creditor's Name Number Street	• Code	Explain what happer Property was f Property was f Property was g	ned epossessed. oreclosed.		Value of the property
Creditor's Name Number Street	• Code	Explain what happer Property was f Property was f Property was g	ned repossessed. oreclosed. garnished. attached, seized, or levie		
Creditor's Name Number Street	• Code	Explain what happer Property was f Property was g Property was g	ned repossessed. oreclosed. garnished. attached, seized, or levie	d.	Value of the property \$ Value of the property
Creditor's Name Number Street	· Code	Explain what happer Property was f Property was g Property was g	ned repossessed. oreclosed. garnished. attached, seized, or levie	d.	\$Value of the propert
Creditor's Name Number Street City State ZIP	Code	Explain what happer Property was f Property was g Property was g	epossessed. oreclosed. garnished. attached, seized, or levie	d.	\$Value of the propert
Creditor's Name Number Street City State ZIP Creditor's Name	Code	Explain what happer Property was f Property was f Property was g Property was a	ned repossessed. r	d.	\$Value of the propert
Creditor's Name Number Street City State ZIP Creditor's Name	Code	Explain what happed Property was of Property w	ned repossessed. repossessed. garnished. attached, seized, or levie	d.	\$Value of the propert
Creditor's Name Number Street City State ZIP Creditor's Name	Code	Explain what happer Property was of	ned repossessed. repossessed. garnished. attached, seized, or levie	d. Date	\$Value of the propert

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 49 of 57

First Name Middle Name Last	Name			
thin 90 days before you filed for bankru	ntcy did any creditor	including a bank or financial inc	titution set off new a-	
counts or refuse to make a payment bec	cause you owed a debt	?	ululon, sel on any ar	nounts from your
No				
Yes, Fill in the details.		,		
	Describe the action th	an avaditar tank	Data satis	
	bescribe the action to	ie ciedito) took	Date action was taken	Amount
Creditor's Name		Charles and majoris and a majorist particles and the majorist contract of the	1 Mart 2 1 1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1	
	-			\$
Number Street				~ <u></u>
	-			
City State ZIP Code	Last 4 digits of accou	int number: XXXX		
hin 1 year before you filed for bankrupt	cy, was any of your pro	operty in the possession of an a	ssignee for the benef	it of
ditors, a court-appointed receiver, a cus	stodian, or another off	icial?		
No				
Yes				
	**			
List Certain Gifts and Contribu	tions			
	tcy, did you give any g	ifts with a total value of more the	an \$600 per person?	
No	tcy, did you give any g	ifts with a total value of more the	an \$600 per person?	
No	tcy, did you give any g	ifts with a total value of more the	an \$600 per person?	
No Yes. Fill in the details for each gift.		ifts with a total value of more the		
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600	tcy, did you give any g Describe the gifts	ifts with a total value of more the	Dates you gave	Value
No Yes. Fill in the details for each gift .		ifts with a total value of more the	Dates you gave	Value
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600		ifts with a total value of more the	Dates you gave	Value
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600		ifts with a total value of more the	Dates you gave	Value \$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person		ifts with a total value of more the	Dates you gave	Value \$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person		ifts with a total value of more the	Dates you gave	Value \$\$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift		ifts with a total value of more the	Dates you gave	Value \$\$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person		ifts with a total value of more the	Dates you gave	Value \$\$
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Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street	Describe the gifts		Dates you gave	Value \$ \$
Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code	Describe the gifts	ifts with a total value of more the	Dates you gave	Value \$ \$
Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600	Describe the gifts Describe the gifts		Dates you gave the gifts Dates you gave	Value \$ Value
Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you	Describe the gifts Describe the gifts		Dates you gave the gifts	\$\$
Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600	Describe the gifts Describe the gifts		Dates you gave the gifts Dates you gave	\$\$ \$Value
Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600	Describe the gifts Describe the gifts		Dates you gave the gifts Dates you gave	\$\$
Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person	Describe the gifts Describe the gifts		Dates you gave the gifts Dates you gave	\$\$ \$Value
Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person	Describe the gifts Describe the gifts		Dates you gave the gifts Dates you gave	\$\$ \$Value
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person	Describe the gifts Describe the gifts		Dates you gave the gifts Dates you gave	\$\$ \$Value
Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street Gity State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift	Describe the gifts Describe the gifts		Dates you gave the gifts Dates you gave	\$\$ \$Value
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Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift	Describe the gifts Describe the gifts		Dates you gave the gifts Dates you gave	\$\$ \$Value

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 50 of 57

or 1	Pamela L. King-Fisher First Name Las	t Name Case number (if known)_		
Vith	in 2 years before you filed for bankru	ptcy, did you give any gifts or contributions with a total valu	ue of more than \$6	00 to any charity?
Z) r				
	Gifts or contributions to charities	Describe what you contributed	ti e	
	that total more than \$600	Describe what you contributed	Date you contributed	Value
ā	Charity's Name		***************************************	\$
_			er a demanda - Company (de	\$
77			Authorities of Harling	***************************************
î.	iumber Street	4 - 100	Andrian and a second a second and a second and a second and a second and a second a	
ċ	ity State ZiP Code		ngg Aka	
1	os. Fill in the details. Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss	Date of your	Value of property
,		Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	1055	·
			webernare basedon-blanched blok Hebberreks	\$
		t descriptival all personal and the control of the		
A	List Certain Payments or Trans	sfers	٠	
ou c iclud	consulted about seeking bankruptcy o de any attorneys, bankruptcy petition pre	cy, did you or anyone else acting on your behalf pay or tran r preparing a bankruptcy petition? parers, or credit counseling agencies for services required in yo		to anyone
		Description and value of any property transferred	Date payment or transfer was	Amount of paymen
F	Person Who Was Paid	and the second s	made	
P	vianber Street			\$
			AVAILABLE TO THE TOTAL THE TOTAL TO THE TOTAL THE TOTAL TO THE TOTAL THE TOTAL TO T	\$
Č	Sity State ZIP Code			
Ë	imail or website address			
7	Person Who Made the Payment, if Not You			

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 51 of 57

	Name	Case numb	♥((d known)		
стий баямаладыны милет изылганы мүшүнүнү түзү түрөкү майымама алуулуунун түзүнүн алымана алуулуу жайымалады. Д	page management of the state of			gar / an historia de misse de meste meste mente mentre mentre para estra de l'Archiel sepe l'anne l'anne de m T	ilin angeography ng ng ng 1, ang 1, ang 1, ang
	Description and value of any property to	ransferred		Date payment or transfer was made	Amount of payment
Person Who Was Paid	-				
Number Street	•				\$
AT IN COLUMN TO THE PROPERTY OF THE PROPERTY O					\$
City State ZIP Code			A control of the cont		
Email or website address	_		Seminary of the seminary of th		
Person Who Made the Payment, if Not You			TO STATE TO STATE AND ADDRESS.		
not include any payment or transfer that you not include any payme	ou iisieu on iiile 16.				
	Description and value of any property tr	ansferred		Date payment or transfer was	Amount of pay
Person Who Was Paid				made	
Number Street					\$
NULL DE CONTRACTOR CON			and the second s		œ
City State ZIP Code			T and an a second control of the second cont	· · · · · · · · · · · · · · · · · · ·	Φ
	And the second s		~ /		
thin 2 years before you filed for bankrup nsferred in the ordinary course of your I	business or financial affairs?				
thin 2 years before you filed for bankrup insferred in the ordinary course of your I clude both outright transfers and transfers in the not include gifts and transfers that you have	business or financial affairs? nade as security (such as the granting of				
thin 2 years before you filed for bankrup nsferred in the ordinary course of your I clude both outright transfers and transfers in not include gifts and transfers that you have	business or financial affairs? nade as security (such as the granting of				
thin 2 years before you filed for bankrup nsferred in the ordinary course of your I lude both outright transfers and transfers in not include gifts and transfers that you have No	business or financial affairs? nade as security (such as the granting of	a security int	erest or m	ortgage on your prop	erty).
thin 2 years before you filed for bankrup nsferred in the ordinary course of your I lude both outright transfers and transfers in not include gifts and transfers that you hav No	business or financial affairs? nade as security (such as the granting of ve already listed on this statement. Description and value of property	a security int	erest or m	ortgage on your prop	erty). Date trans
thin 2 years before you filed for bankrup nsferred in the ordinary course of your I ude both outright transfers and transfers in not include gifts and transfers that you hav No Yes. Fill in the details.	business or financial affairs? nade as security (such as the granting of ve already listed on this statement. Description and value of property	a security int	erest or m	ortgage on your prop	erty). Date trans
thin 2 years before you filed for bankrup nsferred in the ordinary course of your lilude both outright transfers and transfers mot include gifts and transfers that you have No Yes. Fill in the details. Person Who Received Transfer	business or financial affairs? nade as security (such as the granting of ve already listed on this statement. Description and value of property	a security int	erest or m	ortgage on your prop	erty). Date trans
thin 2 years before you filed for bankrup nsferred in the ordinary course of your I lude both outright transfers and transfers mot include gifts and transfers that you have No Yes. Fill in the details. Person Who Received Transfer	business or financial affairs? nade as security (such as the granting of ve already listed on this statement. Description and value of property	a security int	erest or m	ortgage on your prop	erty). Date trans
thin 2 years before you filed for bankrup insferred in the ordinary course of your laude both outright transfers and transfers in not include gifts and transfers that you have No Yes. Fill in the details. Person Who Received Transfer Number Street	business or financial affairs? nade as security (such as the granting of ve already listed on this statement. Description and value of property	a security int	erest or m	ortgage on your prop	erty). Date trans
thin 2 years before you filed for bankrup insferred in the ordinary course of your l lude both outright transfers and transfers in not include gifts and transfers that you have No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code	business or financial affairs? nade as security (such as the granting of ve already listed on this statement. Description and value of property	a security int	erest or m	ortgage on your prop	erty). Date trans
thin 2 years before you filed for bankrup nsferred in the ordinary course of your libide both outright transfers and transfers in not include gifts and transfers that you have No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code Person's retationship to you	business or financial affairs? nade as security (such as the granting of ve already listed on this statement. Description and value of property	a security int	erest or m	ortgage on your prop	erty). Date trans
thin 2 years before you filed for bankrup insferred in the ordinary course of your lided both outright transfers and transfers in not include gifts and transfers that you have No Yes. Fill in the details. Person Who Received Transfer City State ZIP Code Person's relationship to you	business or financial affairs? nade as security (such as the granting of ve already listed on this statement. Description and value of property	a security int	erest or m	ortgage on your prop	erty). Date trans

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 52 of 57

tain Financial Account fore you filed for bankrupoved, or transferred?	Description and value of the prop	Boxes, and Storagor instruments held in	e Units your name, or for your	Date transfer was made
tain Financial Account fore you filed for bankrupoved, or transferred?	asset-protection devices.) Description and value of the property of the prope	Boxes, and Storagor instruments held in	e Units your name, or for your	Date transfer was made
tain Financial Account fore you filed for bankrupoved, or transferred?	asset-protection devices.) Description and value of the property of the prope	Boxes, and Storagor instruments held in	e Units your name, or for your	Date transfer was made
tain Financial Accoun fore you filed for bankru oved, or transferred? g, savings, money marke	ts, Instruments, Safe Depositotcy, were any financial accounts of the country of	Boxes, and Storagor instruments held in	e Units your name, or for your	was made
tain Financial Accoun fore you filed for bankru oved, or transferred? g, savings, money marke	ts, Instruments, Safe Depositotcy, were any financial accounts of the country of	Boxes, and Storagor instruments held in	e Units your name, or for your	was made
tain Financial Accoun fore you filed for bankrup oved, or transferred? g, savings, money marke	ts, Instruments, Safe Depositotcy, were any financial accounts of the country of	Boxes, and Storagor instruments held in	e Units your name, or for your	was made
tain Financial Accoun fore you filed for bankrup oved, or transferred? g, savings, money marke	ts, Instruments, Safe Depositotcy, were any financial accounts of the country of	Boxes, and Storagor instruments held in	e Units your name, or for your	was made
tain Financial Accoun fore you filed for bankrup oved, or transferred? g, savings, money marke	ts, Instruments, Safe Depositotcy, were any financial accounts of	Boxes, and Storagor instruments held in	e Units	
tain Financial Accoun fore you filed for bankrup oved, or transferred? g, savings, money marke	ts, Instruments, Safe Depositotcy, were any financial accounts of	Boxes, and Storagor instruments held in	e Units	
fore you filed for bankrup oved, or transferred? g, savings, money marke	ts, Instruments, Safe Depositotcy, were any financial accounts of	Boxes, and Storagor instruments held in	e Units	
fore you filed for bankrup oved, or transferred? g, savings, money marke	ts, Instruments, Safe Depositotcy, were any financial accounts of	Boxes, and Storagor instruments held in	e Units	
fore you filed for bankrup oved, or transferred? g, savings, money marke	otcy, were any financial accounts of	or instruments held in	your name, or for your	
fore you filed for bankrup oved, or transferred? g, savings, money marke	otcy, were any financial accounts of	or instruments held in	your name, or for your	
		ianolai montatione.		nons,
ie details.				
	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance befo closing or transfe
cial Institution		Checking		\$
et	ut.			
State ZIP Code				
		Ciliei		•
	XXXX	☐ Checking		\$
cial Institution		☐ Savings		
et .	_	Money market		
	-	☐ Brokerage		
	-	Other		
State ZIP Code				
	State ZIP Code	Last 4 digits of account number XXXX—	Last 4 digits of account number Type of account or instrument XXXX	Last 4 digits of account number Type of account or instrument Closed, sold, moved, or transferred XXXX

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 53 of 57

ebtor 1 Pamela L. Ki		1 Name	Ca	ase number (if known)		
2. Have you stored property	in a storage unit	or place other than your home	within 1 vos	ur hefore you filed for han	kruntau?	
2 No		The product and your none	within 1 yee	in belote you thed for ball	cruptcy?	
Q Yes. Fill in the details.						
		Who else has or had access to	it?	Describe the contents	to the control of the following of the first	Do you stil
			W-11-1	: :		□ No
Name of Storage Facility		Name				☐ Yes
Number Street		Number Street		-		rate and another may
Arten 1884, 1884, propriessors a processor to the ball and ball-supply property of the contact to the		City State ZIP Code		-		
City	State ZIP Code					: 2
entify Prop	erty You Hold	or Control for Someone Els	60			
. Do you hold or control an	y property that s	omeone else owns? include ar	ny property y	ou borrowed from, are st	oring for,	
or hold in trust for someo				·	•	
☑ No						
Yes. Fill in the details.						
		Where is the property?		Describe the property		Value
					1	
Owner's Name)	:	\$
		Number Street				
Number Street						
					A to be a second	
City	State ZIP Code	City State	ZIP Code	- 		
ari 10). Give Details A	havé Envisann	nental information				
Give Details A	about Environi	nental information				
or the purpose of Part 10, th	ne following defir	nitions apply:				
hazardous or toxic substa	inces, wastes, or	e, or local statute or regulation material into the air, land, soil ng the cleanup of these substal	, surface wa	ter, groundwater, or other		
Site means any location, f	acility, or proper	ty as defined under any enviro	•		perate, or	
		it, including disposal sites.		nga tanangalawa esibada	. 4aul-	
		vironmental law defines as a ha contaminant, or similar term.	azardous wa	ste, hazardous substance	, toxic	
port all notices, releases, a	and proceedings	that you know about, regardle	ss of when t	hey occurred.		
Has any governmental uni	t notified you tha	it you may be liable or potentia	lly liable und	ler or in violation of an en	vironmental lav	w?
Ø No						
Yes. Fill in the details.						
		Governmental unit	Environn	nental law, if you know it	D	ate of notice
		OOVERHEIMEN GUM		The state of the s		**** ***
					:	
Name of site	ayadda ahaa ahaa ahaa ahaa ahaa ahaa aha	Governmental unit			; -	
		Number Street	:			
Number Street		Number Street				
		City State ZiP Code	_			
City	ate ZIP Code					

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 54 of 57

	E Lust Name	Case number (# known)	
	al unit of any release of hazardous materia	?	·
M No			
Yes. Fill in the details.	O	<u></u>	
	Governmental unit	Environmental law, if you know it	Date of notice
			901
Name of site	Governmental unit		
Number Street	Number Street	The second secon	
	City State ZIP Code		
City State ZIP	Code		
	al or administrative proceeding under any	environmental law? Include settlements	and orders.
1 No			
Yes, Fill in the details.		grade to the	Marking of the
	Court or agency	Nature of the case	Status of the case
Case title			_
	Court Name	- '	Pending
APPERTY RESERVENCEMENTS IN THE LAST AND APPEALANCE IN THE APPEALANCE AND APPEALANCE AND APPEALANCE AND APPEALANCE AND	COMMON PROCESS OF THE	:	On appea
	Number Street	-	Conclude
Case number	City State ZIP Code		
	on, one 20 one		
XII Give Details About Yo	ur Business or Connections to Any E	usiness	
Vithin 4 years before you filed for i	pankruptcy, did you own a business or hav	e any of the following connections to any	/ business?
•	pankruptcy, did you own a business or hav ployed in a trade, profession, or other activ		/ business?
☐ A sole proprietor or self-emp ☐ A member of a fimited liability		rity, either full-time or part-time	/ business?
☐ A sole proprietor or self-emple A member of a limited liabilities A partner in a partnership	oloyed in a trade, profession, or other activity company (LLC) or limited liability partne	rity, either full-time or part-time	/ business?
☐ A sole proprietor or self-emp ☐ A member of a fimited liabili ☐ A partner in a partnership ☐ An officer, director, or mana	oloyed in a trade, profession, or other activity company (LLC) or limited liability partne	rity, either full-time or part-time rship (LLP)	/ business?
☐ A sole proprietor or self-emp ☐ A member of a fimited liabili ☐ A partner in a partnership ☐ An officer, director, or mana	oloyed in a trade, profession, or other activity company (LLC) or limited liability partne	rity, either full-time or part-time rship (LLP)	/ business?
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Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 55 of 57

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Official Form 107

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Page 56 of 57 Document

Fill in this in	formation to ide	ntify your case:		
Debtor 1	Pamela L.	King-Fisher		
Debtor 2 (Spouse, if filing		Middle Name	Last Name	
		r the: Northern District of I	Last Name	
Case number	Bankrupicy Court to	rtne: Normem District of I	iinois	☐ Check if this is a
(If known)	*****			amended filing
L				

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

If you are an individual filing under chapter 7, you must fill out this form if:

- □ creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

List Your Creditors Who Have Secured Claims

For any creditors that you listed in Part 1 of <i>Schedule L</i> information below.		
Identify the creditor and the property that is collateral	What do you intend to do with the property th secures a debt?	at Did you claim the property
Creditor's name:	☐ Surrender the property.	□ No
and the first of the control of the	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
3	Retain the property and [explain]:	
**************************************	☐ Surrender the property.	
name:	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	********
Creditor's	☐ Surrender the property.	No
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	·
reconstructive of the control of th	☐ Surrender the property.	
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	

12/15

Case 17-29025 Doc 1 Filed 09/28/17 Entered 09/28/17 11:14:49 Desc Main Document Page 57 of 57

ded. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Describe your unexpired personal property leases Will the lease be assumed?				
essor's name:	D No			
Description of leased roperty:	Yes			
essor's name:	□No			
lescription of leased roperty:	☐ Yes			
essor's name;	□ No			
rescription of leased roperty:	☐ Yes			
	можения по			
escription of leased roperty:	☐ Yes			
essor's name:	□ No			
escription of leased roperty:	☐ Yes			
essor's name:	□ No			
escription of leased operty:	Yes			
essor's name:	□ No			
escription of leased operty:	Yes			
r (old color) de las discloristes (old de la graphic y and processes en personan en personan en consumer de nome anno de nome and profit and consumer de la fill de l				
3). Sign Below				

Date MM / DD / YYYY